



CITY OF CARDIFF.

ANNUAL REPORT

FOR 1924

OF THE

MEDICAL OFFICER OF HEALTH.

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Printed by Order of the Urban Sanitary Authority.

CARDIFF :
S. GLOSSOP AND SONS, LTD., NEW STREET.

1925.

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* Cert. Royal San. Inst. † Cert. Meat Insp. Royal San. Inst. ‡ General Trained Nurse. § Certified Midwife.
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PUBLIC HEALTH DEPARTMENT,

CITY HALL, CARDIFF,

August, 1925.

*To the Right Honourable The Lord Mayor, Aldermen and Members
of the City Council of Cardiff.*

MY LORD MAYOR, LADIES AND GENTLEMEN,

The usual statistical returns for 1924, with such comments as appear suitable, are submitted herewith. The letter-press has been cut down this year in view of the fact that the Ministry of Health have intimated their intention of asking for an extended Survey Report next year, and several matters which might have been dealt with at length may conveniently be held over till then.

Population.—The population at June, 1924, has been estimated by the Registrar-General at 226,400. This is only 200 over his estimate of 226,200 for last year, which even then I considered too low. The natural increase of the population in 1924, *i.e.*, the excess of births over deaths, was 2,142. My view is that the Registrar-General's estimate is again too low and that the actual population is nearer 230,000, but it must be admitted that we have no local means of gauging the effect of migration, and it is also possible that the Registrar-General's estimate for 1923 was too high, accounting for the apparently slight increase in 1924.

Births.—The number of births of live children registered in Cardiff during the year was 4,882, giving a birth-rate of 21·6 per thousand of the estimated population. In comparing this rate with 22·3 last year, it should be noted that, if last year's estimate of the population was too high or this year's too low, the decline of the birth-rate is even greater than it appears to be. Details of the births are given in Section 2.

In addition to the live births, 263 still-births came to the knowledge of the Department. If these are placed against the total number of births notified (5,277*) it will be seen that 5·0 per cent. of conceptions were known to end in the birth of a dead infant. In order to state the total loss of foetal life it would be necessary to ascertain the number of conceptions ending in abortion, of which no information is available.

The present trend of the birth-rate need not give rise to pessimism. The births still greatly exceed the deaths in each year. In any case, an increasing population or a population steadily maintained at a high level is not necessarily of advantage to a community. It is only so if there is prospect of the new members producing more than they require to consume. If the reverse should happen to be the case, and the excess of births over deaths is not relieved by emigration, the result must be an increase of poverty and ill-health. Again, it is customary to bemoan the adverse balance of births as between the poor and the well-to-do. I see no evidence that the quality of brain or physique inherited by the former is inferior. It is the function of the Health and Education Authorities to see that the good stock which preponderates in all classes of society reaches manhood and womanhood physically, mentally and morally unimpaired by adverse influences.

Deaths.—The deaths from all causes numbered 2,740, the rate per thousand being 12·1 as compared with 12·0 last year. The number of deaths of infants under one year of age was 382, giving a rate per thousand births of 78, which is lower than any other year except 1923, when the rate was 74. The increase is more than accounted for by the epidemics of influenza and whooping

* This figure includes births that occurred but were not registered during 1924 and a number transferred outwards.

cough which occurred in the Spring, causing a rise in the mortality from respiratory diseases among infants as well as older children and adults.

As usual the proportion of deaths among illegitimate children was high. The mortality per thousand illegitimate births was 216 as against 74 among the legitimate.

Causes of Death.—As in previous years the main causes of death fall under four broad headings, viz., diseases of the respiratory system (including influenza) 597, diseases of the heart and arteries (including cerebral hæmorrhage) 553, tuberculosis 345 and cancer 265. Together these diseases accounted for 1,760 deaths, or 64 per cent. of the total. The relative importance of these causes remains constant from year to year except in the case of respiratory diseases which vary with the incidence of epidemic diseases such as influenza, measles and whooping cough.

Acute Infectious Diseases.—Contrary to expectation the decline in the incidence of scarlet fever and diphtheria, which appeared to have reached its lowest possible limit last year, has been even more pronounced in 1924, as shown by the following table:—

Year.	Cases of Diphtheria.			Cases of Scarlet Fever.			Total.
1919	257	...	...	2,166	2,423
1920	366	...	...	1,351	1,717
1921	317	...	...	683	1,000
1922	247	...	...	363	610
1923	221	...	...	348	569
1924	204	...	...	190	394

Scarlet fever and diphtheria continue to be comparatively mild in type and the death-rate from these causes remains low (0.01 and 0.04 per thousand respectively).

Throughout the country encephalitis lethargica was exceptionally prevalent in the early part of the year. Practically every large town was affected, and the incidence was heavy in cities as far west as Bristol, Birmingham, Manchester and Liverpool. Yet only 10 cases came to the knowledge of the Department in Cardiff, and cases appear to have been equally scarce in Swansea, Newport and Merthyr. I know that medical practitioners in Cardiff were on the outlook for cases, and there is no reason to suppose that any higher proportion escaped notification here than elsewhere. Moreover, we have not discovered through the child welfare or school medical sections of the Department any notable number of children exhibiting the after-effects of this disease. Cardiff's recent immunity from encephalitis, coupled with the somewhat exceptional incidence of the similar disease poliomyelitis which we experienced in the Summer of 1923, is an example of the puzzling behaviour of epidemic diseases and the danger of drawing conclusions from any statistics but those gathered over a long period of years.

No cases of smallpox occurred, and only 22 cases of poliomyelitis were discovered. Many of the latter sickened in the Summer or Autumn of 1923, during which year 46 cases were actually notified.

Puerperal sepsis was notified in 24 instances as compared with 30 last year, and the deaths number 9 as against 14. It is possible that these figures reflect a real decline of this disease, but notification is still very imperfect. The matter is receiving special attention from a strong committee of the British Medical Association, of which Sir Ewen Maclean is Chairman, the object being to define more clearly the type of case covered by the term puerperal sepsis and to advance by all possible means preventive and curative measures against the disease.

Ophthalmia neonatorum occurred in 96 infants, as against 104 last year. Blindness of one eye resulted in one instance.

Notifications of pneumonia increased from 190 last year to 294 in 1924 as the result of the recrudescence of influenza already referred to. For the first time the notifications exceeded the deaths, which numbered 249.

In October a circular letter was sent to all medical practitioners in Cardiff informing them that hospital accommodation would be available for cases of poliomyelitis in the acute stage, encephalitis lethargica and puerperal fever. So far very little use has been made of these facilities. The problem of utilising the beds in Local Authority hospitals to the greatest advantage was dealt with in notes prepared for the Voluntary Hospitals Committee, which are reproduced in Appendix I. of this Report.

Tuberculosis.—The number of cases coming to the knowledge of the Department in 1924 was 496 (385 pulmonary and 111 non-pulmonary). The corresponding figure last year was 503 (388 pulmonary and 115 non-pulmonary). The number of deaths from this cause was 345 (289 pulmonary and 56 non-pulmonary) as against 374 last year (302 pulmonary and 72 non-pulmonary).

In my previous Reports I have drawn attention to the number of cases of tuberculosis dying without having been notified. In 1924 the neglect of notification was even greater than before. Altogether 20·6 per cent. of the deaths were in this category (14·9 per cent. of those from the pulmonary form and 50·0 per cent. of non-pulmonary). The position is very unsatisfactory. Reminders are constantly being sent to medical practitioners that notification is obligatory, and repeated circulars have directed their attention to the fact that a successful tuberculosis scheme must be founded on early notification of cases. We do not experience this difficulty with the other notifiable diseases for the prevention and treatment of which we make adequate provision.

Last year a chart was included in the Report showing the upward tendency of the relative mortality from pulmonary tuberculosis in Cardiff, a tendency which I have failed to trace in any other large city. Although the normal fluctuation has brought the mortality a little lower this year, the tuberculosis death-rate remains high as compared with the rate for other large towns. I am indebted to Prof. Wynne, Medical Officer of Health of Sheffield, for the following figures which he has gathered for 1924 :—

Town.	Population.	DEATH-RATE PER MILLION.	
		Respiratory Tuberculosis.	All Forms of Tuberculosis.
Liverpool	836,396	1,300	1,500
Cardiff	226,400	1,276	1,524
Salford	243,700	1,190	1,510
Leicester	241,800	1,186	1,438
Manchester	755,119	1,180	1,480
Newcastle-on-Tyne ...	285,900	1,120	1,470
Leeds	471,600	1,088	1,393
Plymouth	192,900*	1,083	1,306
Hull	296,800	1,037	1,320
Birmingham... ..	944,386	973	1,099
West Ham	317,400	970	1,191
Nottingham	270,300	960	1,160
Portsmouth	232,000*	938	1,162
Bristol	386,200	934	1,116
Stoke-on-Trent	278,000	920	1,160
Bradford	290,200	882	1,051
Sheffield	525,000	821	1,023

* Civil.

In this particular year the mortality from pulmonary tuberculosis in Cardiff was exceeded only in Liverpool, and the death-rate from all forms of tuberculosis was higher in Cardiff than in any other of the towns over 200,000 population. It is important to note that the sea-ports figure as much in the lower half of the table as in the upper, so that a reason for our heavy toll is not obviously to be found in this direction. So far I have been unable to trace any cause related to the nationality or origin of the population, or their age-distribution, or any climatic or environmental factor operating in this city. The occupational table, however, given for the first time in the Report (p. 23) reveals a very high proportion of seafaring men among the new cases (56 out of 284 male cases).

Venereal Diseases.—The decline in the number of new cases of these diseases is again reflected in the figures for 1924 as compared with recent years :—

	1921	1922	1923	1924
Cardiff Royal Infirmary	793	634	657	588
Royal Hamadryad Seamen's Hospital ...	868	788	821	615
	1,661	1,422	1,478	1,203

Whether this is partly due to waning trade only a revival of trade will show, but it is generally held that the spreading net of anti-venereal propaganda and treatment all over the world is very largely responsible.

The ordinary annual figures and also special returns from the centres reveal, as in former years, that these centres are not attracting the innocently acquired cases among women and children. This question has been constantly before the Committee in recent times, and provision has now been made for special clinics to be held at least twice weekly in connection with the maternity and child welfare scheme, at which women and children will be treated without any stigma which may seem to be attached to the *ad hoc* venereal diseases department.

Cancer.—This disease was dealt with at some length in the body of last year's Report and statistics are again included. Toward the end of 1924 a Local Advisory Committee met, consisting almost entirely of specialists, which drew up a comprehensive scheme for a campaign against cancer. Unfortunately, stress of work in connection with the extension of school and child welfare clinics, and shortage of staff, have hindered its full development, but Dr. Adams and Dr. Coulthard have made a survey of certain records, with the willing co-operation of the managers and medical staff of the Infirmary, and it is hoped to complete shortly a statement showing the remote results of operations for cancer of the breast over a number of years. Voluntary notification has also been adopted and a propaganda leaflet has been issued under the authority of the Committee, reproduced on page 16 of this Report.

Maternity and Child Welfare.—Expansion and development of this side of the Department's work have occupied a great part of the time of the staff during the past year. Reference has already been made to the special arrangements for treatment of women and children suffering from venereal diseases; the ante-natal clinic jointly conducted by the Local Authority and the Cardiff Royal Infirmary was dealt with in my Report last year (Appendix I.); and further developments in conjunction with the work of the school clinics, including orthopaedic provision, are set out in my Report on school medical work for 1924. The joint ante-natal clinic was opened on 18th December, 1924, and up to the time of writing bids fair to justify the hopes entertained as to its value as an integral part of the scheme.

Certain rooms which will be available at the new Gabalfa clinic may serve useful purposes in connection with the child welfare scheme. The large billiard room is well suited for lectures and demonstrations to mothers, and it is possible that accommodation might also be found for a few babies who are not ill enough to be taken into hospital but require skilled observation for a short period. Development along these lines would add greatly to the value of the work of the clinics.

Provision for the treatment of cripples under school age has been made at the new clinic at 50, Park Place, a room in that building being set apart and equipped for dealing with crippled children of all ages. A specially qualified nurse has been appointed to follow up such cases, to keep them in touch with the Prince of Wales' Hospital and to administer massage, electricity and and postural treatment. The services of Major Alwyn Smith have been retained for periodical visits to the clinic. Of 286 crippled children so far discovered, 93 are under 5 years of age and therefore fall within the province of the child welfare section of the Department.

Medical Service.—The problem of the most effective use of the medical staff in the diverse functions of a modern public health department is becoming more and more complicated. Obviously the easiest administrative arrangement is to allocate one or more medical officers to a particular section of the work. The effect of this method, however, is to create water-tight compartments in which the staff are apt to lose the wider outlook which is essential to their highest development. The more varied the work, the more stimulating and interesting it is. In order, therefore, to attain the highest ultimate efficiency the staff of this Department are each employed in as many branches of the work as it is possible to arrange, even at considerable administrative inconvenience.

The practice, too, of contracting out with voluntary bodies for some of the most important and interesting sections of the clinical work has a paralysing influence on the mental development of the whole-time medical staff. At the same time it is recognised that by such contracts the highest specialist skill is put at the disposal of the Local Authority. In order to retain the latter without depriving our own staff of the opportunity of becoming familiar with the clinical aspect of the schemes which they must deal with administratively, it has been arranged that they are actually associated with that part of the clinical work of the voluntary institutions which is financed by the Corporation.

My views on this question and on the relations of whole-time medical officers to general practitioners are set out in a contribution to the "Medical World" which is reproduced in Appendix II.

Public Health Education.—The importance of sane and balanced propaganda in relation to health questions has been referred to in previous Reports. A Propaganda Sub-Committee has been formed and has taken over the functions of the Local Branch of the British Social Hygiene Council (formerly the National Council for Combating Venereal Diseases). Several important questions have been referred to this Sub-Committee, but, for reasons already referred to under the heading "Cancer," it has been impossible so far to get the work of the Sub-Committee launched. This will be done as soon as time and the stress of routine work permit, and there are signs that advice and assistance in this direction will be forthcoming from the Ministry of Health. It is probable also that the Local Insurance Committee will be glad to join in any educational efforts calculated to raise the standard of public hygiene.

Voluntary Hospital Accommodation.—The number of beds available for all purposes has been under review in Cardiff as elsewhere during the year. I was asked for my views by the Local Voluntary Hospitals Committee, and my notes on the subject are reproduced in Appendix I.

Milk.—Steady progress has been made during the year in improving the conditions under which milk is produced, handled and retailed in the city. A record of the bacteriological examinations of Grade A milk is given on pages 44–46, showing that the prescribed standard of bacterial content was exceeded only on six occasions. This grade of milk is now produced in one farm in the city and there are five licensed retailers. It is, however, disappointing to record that no Grade A (Tuberculin Tested) milk is yet on sale. The table on page 42 which indicates the relatively high standard of cleanliness in the ordinary commercial milks which have been sampled is more satisfactory. The distinctly high level of cleanliness which has now been attained is to be attributed, in my opinion, to the keen personal attention given to this problem by Chief Inspector Evans. Fifty-three samples of milk were examined for the presence of tubercle bacilli which were discovered in one instance only.

Blind Persons Act.—A beginning has been made in the working of the scheme under this Act. The table in Appendix VI. shows the number of blind persons in different categories known to be living in the city at 31st March, 1925. One Home Visitor or Teacher was appointed in April, 1923, and another in May, 1924. Both were females (one partially blind and the other sighted) and they made altogether 2,287 visits during the year. The amount of financial assistance given to blind persons during the year amounted to £144.

Mental Deficiency Act.—As in my last Report a record of the work done by the Department for the Mental Deficiency Committee is set out in Appendix VII.

I have the honour to be,

My Lord Mayor, Ladies and Gentlemen,

Your obedient Servant,

RALPH M. F. PICKEN,

Medical Officer of Health.

Section 1.

GENERAL STATISTICS.

Area—Including inland water, foreshore and Flatholm	...	...	13,628 acres.
Excluding foreshore and Flatholm	...	...	11,984 „
Excluding inland water, foreshore and Flatholm	...	...	11,580 „
Population (estimated by the Registrar-General)...	...	...	226,400
Number of persons per acre (exclusive of foreshore and Flatholm) ...			18.9
Number of structurally separate inhabited houses (estimated)	...		39,000
Number of structurally separate inhabited houses per acre	...		3.25
Average number of persons per occupied house	...	...	5.80
Rateable value (October, 1924)	...	...	£1,628,657
Sum represented by a penny rate	...	...	£6,030

Section 2.

VITAL STATISTICS.

BIRTHS.

The number of births registered during the year, arranged in wards and sub-divided according to sex and legitimacy, is shown in Table I, Appendix III. This table is summarised in the following brief statement :—

	Legitimate	Illegitimate	Totals
Males	2,462	82	2,544
Females	2,272	66	2,338
Totals	4,734	148	4,882
Rate per 1,000 population	20.9	0.7	21.6

The rates for former years and for other places are given for comparison :—

	Cardiff			England and Wales 1924	105 Great Towns 1924
	1924	1923	1914-1923		
Birth-rate per 1,000 ...	21.6	22.3	22.8	18.8	19.4

The birth-rate in each ward is given in Table IV., Appendix III.

DEATHS.

The deaths in 1924, classified according to age and cause (Registrar-General's short list) are set out in Table II., Appendix III. The ward distribution of the deaths and the death-rates are included in Table IV., and the causes of infant deaths in Table III., Appendix III.

The following is the abbreviated extract of the death statistics required by the Ministry :—

	Males.	Females.	Total.	Death-rate per 1,000.
Deaths from all causes	1,478	1,262	2,740	12.1
Women in Childbirth :—				
			Deaths.	Rate per 1,000 Births.
Sepsis ... ..	...	...	9	1.84
Other causes ... ..	...	...	17	3.48
Total ... ..	...	...	26	5.32
Infants under One year of Age :—				
			Deaths.	Rate per 1,000 Births.
Legitimate ... ..	...	...	350	74
Illegitimate ... ..	...	...	32	216
Total ... ..	...	...	382	78

						Deaths.	Rate per 1,000 Population.
Measles	...	...	...	...	...	35	0.15
Whooping Cough	...	...	...	...	...	44	0.19
						Deaths.	Rate per 1,000 Births.
Diarrhoea (under 2 years)	...	...	...	...	...	53	10.8

Certain of these rates may be tabulated so as to compare with previous years and other places :—

	Cardiff			England and Wales 1924	105 Great Towns 1924
	1924	1923	1914-1923		
Death-rate per 1,000 ...	12.1	12.0	13.6	12.2	12.3
Infant Mortality (Deaths under 1 year per 1,000 Births) ...	78	74	93	75	80
Deaths of women in Child- birth per 1,000 Births :					
Sepsis ...	1.84	2.78	2.11	1.39	—
Other Causes ...	3.48	1.79	2.67	2.51	—
Totals ...	5.32	4.57	4.78	3.90	—

Age Distribution of Population and Deaths.—The following table shows the population, deaths and death-rates at several age periods :—

Age Periods—Years	Estimated Population	Number of Deaths	Death-rate per 1,000
0—5	20,095	579	28.8
5—15	42,861	65	1.5
15—25	43,328	160	3.7
25—45	69,042	379	5.5
45—65	40,566	739	18.2
65 and upwards	10,508	818	77.4
All Ages	226,400	2,740	12.1

CANCER.

The deaths from cancer (malignant disease), a term which includes carcinoma and sarcoma, during 1924 are analysed in the following table according to the part of the body affected and the age and sex of the deceased :—

Cancer—Malignant Disease	25-45 years		45-65 years		65-75 years		75 years and upwards		All Ages		
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	Both Sexes
Buccal Cavity	—	1	9	—	4	1	3	—	16	2	18
Pharynx, Oesophagus, Stomach, Liver and Annexa	—	3	35	22	10	13	5	6	50	44	94
Peritoneum, Intestines and Rectum ...	1	2	4	15	8	7	2	3	15	27	42
Female Genital Organs	—	10	—	15	—	10	—	1	—	36	36
Breast	—	3	—	10	—	9	—	1	—	23	23
Skin	—	—	—	1	2	—	1	2	3	3	6
Other or Unspecified Organs	3	1	17	5	10	4	3	3	33	13	46
Totals	4	20	65	68	34	44	14	16	117	148	265

Dr. Adams has made a special investigation of the circumstances attendant upon the deaths from cancer of the breast among women in Cardiff since January, 1923, with special reference to the duration of illness. The position in relation to the 23 such deaths which occurred in 1924 may be put very briefly as follows :—

1. *General.*

Number of deaths from cancer of breast	...	...	...	23
Average age of cases	...	...	...	60 years
Percentage married or widowed	...	...	...	82.6
Number who had been operated upon	...	...	...	16
Percentage operated upon	...	...	...	69.6

2. *Particulars of sixteen cases operated upon.*

Average intervals in months between—

Discovery and medical opinion	...	...	...	8.1
Medical opinion and first operation	...	...	...	1.4
First operation and death	...	...	...	13.9
Discovery and death	...	...	...	23.3

3. *Particulars of seven cases not operated upon.*

Average intervals in months between—

Discovery and medical opinion	...	...	...	5.1
Medical opinion and death	...	...	...	21.4
Discovery and death	...	...	...	27.9

A propaganda leaflet, of which the following is a copy, has been issued :—

CITY OF CARDIFF.

CANCER OF THE BREAST.

The number of deaths from all forms of cancer in this City as elsewhere is increasing. It has been definitely proved that many deaths from cancer could have been avoided by early treatment.

The only known remedy is an operation at the *earliest possible stage of the disease*. If operation is delayed, the disease spreads and the chance of cure is greatly diminished.

Recent enquiries show that most of the women who die of *cancer of the breast* have waited far too long before consulting a doctor and have delayed undergoing operation when it was advised.

Cancer of the breast commences as a lump, which is usually painless and causes no feeling of illness. *It is at this stage that operation should be done.*

Any lump in the breast should be looked upon with suspicion, especially in women over 40 years of age. Even in younger women it should not be treated lightly.

If any swelling or lump in the breast is found, a doctor should be consulted at once. The greater the delay the more serious the operation required and the smaller the chance of recovery.

Every day is important. No time should be lost.

The Health Committee desire to bring this matter prominently before the public, believing that the increase in the number of deaths from cancer would be checked if advantage were taken of the one and only assured remedy, *early operation*.

RALPH M. F. PICKEN,

Medical Officer of Health.

CITY HALL, CARDIFF.

Further copies of this leaflet and any other information may be obtained on application.

Section 3.

NOTIFIABLE DISEASES.

NOTIFICATIONS, ADMISSIONS TO HOSPITAL, DEATHS, AND FATALITY RATES.

Disease	Cases Notified	Cases-admitted to Isolation Hospital	Deaths	Percentage Fatality
Smallpox	—	—	—	—
Scarlet Fever	180	150	2	1.1
Diphtheria	204	167	10	4.9
Enteric Fever	12	7	—	0.0
Pneumonia*	294	1	249	—
Puerperal Fever	24	—	9	37.5
Cerebro-Spinal Fever	—	—	—	—
Acute Poliomyelitis	22	3	1	4.5
Encephalitis Lethargica	10	3	3	30.0
Dysentery	5	1	1	20.0
Ophthalmia Neonatorum	96	—	—	0.0
Erysipelas	78	—	5	6.4
Malaria	14	—	—	0.0
Chickenpox†	778	5	—	0.0

SMALLPOX.

No cases of smallpox were notified during the year.

Vaccinal State of the Population.—The following table gives the result of the labours of the vaccination officers in connection with 5,022 children during the year:—

Successfully Vaccinated	Insusceptible	Postponed	Certificates of Exemption	Died Unvaccinated	Unaccounted for
2,801	14	149	1,533	257	268

Comparison with previous years is made in the following table:—

	Percentage of Infants not returned as vaccinated	Percentage of Certificates of Exemption
Nine years in the period 1901 and 1910 ...	33.5	4.3
Eight years „ „ 1911 and 1920 ...	54.2	24.1
1921	42.5	29.5
1922	47.7	37.2
1923	35.5	23.5
1924	44.2	30.5

The temporary increase of vaccination in 1923, associated with the smallpox epidemic, has not been maintained. Certificates of exemption were sought and obtained in a higher proportion of cases than in any previous year except 1922.

* Only such cases of pneumonia as fall into the category "acute primary" and "influenzal" are notifiable. Deaths from all forms of pneumonia are included in the fourth column.

† Statutory notification ceased on 20th July, 1924.

OPHTHALMIA NEONATORUM

The following is a record in brief of the activity of the maternity and child welfare section of the Department in relation to ophthalmia neonatorum :—

Notifications received	...	...	...	...	...	113
Duplicate notifications	...	...	...	...	...	17
Actual number of cases notified	...	...	...	...	...	96

Treatment—

By Private Practitioners	...	...	...	...	8
" " assisted by District Nurses	...	...	...	...	52
As hospital out-patients, with home supervision by District Nurses	...	...	...	...	1
At Child Welfare Clinics, assisted by District Nurses	...	...	...	...	20
Institutional cases	...	...	...	...	15

Results—

Vision unimpaired	...	...	...	...	92
Vision impaired (right eye blind)	...	...	...	...	1
Total blindness	...	...	...	...	—
Died from other causes	...	...	...	...	2
Left district	...	...	...	...	1

TUBERCULOSIS.

The following tables show the age-distribution and localisation of the disease among the new cases of, and deaths from, tuberculosis during the year :—

Cases of and Deaths from Tuberculosis by Age and Sex, 1924.

Age Periods— Years	New Cases*						Deaths					
	Pulmonary			Non-Pulmonary			Pulmonary			Non-Pulmonary		
	M	F	Totals	M	F	Totals	M	F	Totals	M	F	Totals
0—1	2	3	5	3	2	5	1	3	4	3	3	6
1—5	4	2	6	11	9	20	4	—	4	6	6	12
5—10	1	1	2	6	8	14	—	1	1	1	—	1
10—15	2	9	11	7	6	13	2	6	8	2	1	3
15—20	25	29	54	4	4	8	16	23	39	4	4	8
20—25	36	24	60	4	5	9	22	25	47	1	1	2
25—35	64	37	101	15	9	24	33	32	65	8	5	13
35—45	36	35	71	7	2	9	33	21	54	5	1	6
45—55	35	14	49	4	1	5	31	8	39	1	1	2
55—65	7	6	13	2	1	3	13	7	20	2	—	2
65—75	9	4	13	—	1	1	3	3	6	—	1	1
75 and upwards	—	—	—	—	—	—	2	—	2	—	—	—
Totals	221	164	385	63	48	111	160	129	289	33	23	56

* Including cases notified after death, deaths not notified, and cases ascertained otherwise than by formal notification.

Cases of and Deaths from Tuberculosis by Form of Disease and Sex, 1924.

Form of Tuberculosis	New Cases*			Deaths		
	Males	Females	Totals	Males	Females	Totals
Respiratory System	221	164	385	160	129	289
Nervous System	14	14	28	13	14	27
Intestines and Peritoneum ...	12	6	18	6	4	10
Vertebral Column	5	4	9	2	2	4
Joints	13	11	24	3	1	4
Other Organs	18	11	29	6	1	7
Disseminated Tuberculosis ..	1	2	3	3	1	4
Totals	284	212	496	193	152	345

Deaths.—Altogether 345 deaths occurred, 289 of them due to the pulmonary form of the disease. They were distributed as to place of death as follows :—

Tuberculosis Hospitals :—

Glan Ely ... ..	...	...	...	23
Beechwood ... ..	...	...	...	4
Cefn Mably ... ..	...	...	...	3
Sanatoria ... ..	...	...	...	2
City Lodge (Union Hospital) ...	...	...	...	54
Cardiff Royal Infirmary ... ..	...	...	...	12
Royal Hamadryad Seamen's Hospital	...	...	...	3
Other Institutions ... ..	...	...	...	17
Lodging Houses ... ..	...	...	...	4
Private Dwelling-houses ... ..	...	...	...	223
TOTAL ... ..	...	...	...	345

Seventy-one of the 345 deaths (20.6 per cent.) were of cases previously unknown to the Department, 43 of these being pulmonary cases (14.9 per cent.) and 28 non-pulmonary (50.0 per cent.).

The 289 deaths from pulmonary tuberculosis correspond to a death-rate of 1.28 and the 56 deaths from other forms of tuberculosis to a death-rate of 0.25 per 1,000, compared with 1.33 and 0.32 per 1,000 respectively in 1923.

Sources of Notification.—These are shown in the following statement :—

Source	Pulmonary	Other Forms	Totals
General Medical Practitioners ...	176	37	213
Welsh National Memorial Association	112	28	140
Medical Officers of Institutions ...	72	27	99
Others	9	3	12
Otherwise ascertained	16	16	32
Totals	385	111	496

* Including cases notified after death, deaths not notified, and cases ascertained otherwise than by formal notification.

Home Conditions.—A detailed analysis is given below, showing the actual living and sleeping conditions within their own tenements of 301 cases of pulmonary tuberculosis notified during the year :—

Living accommodation of 301 Patients in Private Houses :—

Rooms in Tenement (i.e., house or part of house occupied by one family)	Patients			Total number of Persons in Household			
	Males	Females	Totals	Over 10 years	Under 10 years	Lodgers	Totals
1 room	7	8	15	24	4	...	28
2 rooms	29	26	55	140	54	...	194
3 rooms	15	6	21	64	20	...	84
4 rooms and over...	108	102	210	991	215	6	1,212
Totals	159	142	301	1,219	293	6	1,518

In addition to the foregoing 301 cases, 35 (25 males and 10 females) were notified as occurring in institutions, and 21 males in lodging houses.

Sleeping Accommodation of 301 Patients suffering from Pulmonary Tuberculosis and living in Private Houses :—

Rooms in Tenement (i.e., house or part of house occupied by one family)	Patients				Contacts		
	With Room to Self	With Bed but not Room to Self	With neither Bed nor Room to Self	Totals	Sleeping in same Bed as Patient	Sleeping in separate Bed but in same Room as Patient	Totals
1 room	4	1	10	15	12	2	14
2 rooms	7	4	44	55	57	54	111
3 rooms	12	1	8	21	9	5	14
4 rooms and over...	85	26	99	210	116	112	228
Totals	108	32	161	301	194	173	367

This table reveals a very serious state of affairs. Scarcely more than one-third of the new cases had sleeping rooms to themselves, and the number of contacts exposed to infection in the same bedrooms actually exceeded the number of cases. The conditions are worse than they were last year.

Known Cases of Tuberculosis.—In the following tables the number of cases of tuberculosis on the register at 31st December, 1924, is shown, and also the number of those who were under regular observation by the tuberculosis nurses :—

Pulmonary Tuberculosis. Cases on the Register at 31st December, 1924.

Municipal Wards, etc.	MALES.				FEMALES.				Grand Totals
	Under 5 years.	5-15 years.	Over 15 years	Totals	Under 5 years	5-15 years	Over 15 years	Totals	
Central ...	1	2	28	31	...	2	18	20	51
Lodging Houses, etc. ...	...	...	5	5	...	...	...	...	5
South ...	...	2	24	26	...	2	18	20	46
Lodging Houses, etc. ...	...	...	1	1	...	...	...	...	1
Cathays ...	1	1	55	57	...	...	25	25	82
Adamsdown ...	...	1	31	32	1	3	28	32	64
Lodging Houses, etc. ...	...	...	19	19	...	...	...	...	19
Riverside ...	...	1	29	30	...	1	20	21	51
Canton ...	...	3	28	31	1	2	31	34	65
Grangetown ...	...	...	29	29	...	4	20	24	53
Roath ...	...	...	23	23	...	...	24	24	47
Plasnewydd ...	1	1	34	36	...	1	14	15	51
Splott ...	...	2	51	53	...	3	42	45	98
Penylan ...	...	...	22	22	...	1	16	17	39
Llandaff ...	...	3	28	31	1	...	20	21	52
Gabalfa ...	...	...	19	19	...	...	19	19	38
Institutions* ...	...	...	14	14	...	...	2	2	16
Removed and not traced ...	...	...	31	31	...	...	15	15	46
Total ...	3	16	471	490	3	19	312	334	824

Non-Pulmonary Tuberculosis. Cases on the Register at 31st December, 1924 :—

Municipal Wards, etc.	MALES.				FEMALES.				Grand Totals
	Under 5 years.	5-15 years.	Over 15 years	Totals	Under 5 years	5-15 years	Over 15 years	Totals	
Central ...	...	3	3	6	1	2	4	7	13
Lodging Houses, etc. ...	...	...	1	1	...	...	...	...	1
South ...	...	5	3	8	3	2	7	12	20
Lodging Houses, etc. ...	...	...	...	...	...	...	...	...	...
Cathays ...	...	...	10	10	1	1	9	11	21
Adamsdown ...	1	8	6	15	1	2	8	11	26
Lodging Houses, etc. ...	...	...	5	5	...	...	...	...	5
Riverside ...	...	1	5	6	1	4	7	12	18
Canton ...	1	2	4	7	2	4	5	11	18
Grangetown ...	1	4	6	11	1	1	7	9	20
Roath ...	...	2	5	7	...	1	6	7	14
Plasnewydd ...	...	2	6	8	1	3	4	8	16
Splott ...	3	8	10	21	1	7	14	22	43
Penylan ...	...	...	2	2	...	2	10	12	14
Llandaff ...	...	3	5	8	...	4	6	10	18
Gabalfa ...	3	5	1	9	...	4	7	11	20
Institutions* ...	...	1	2	3	...	1	4	5	8
Removed and not traced ...	...	...	12	12	1	2	6	9	21
Totals ..	9	44	86	139	13	40	104	157	296

* The cases shown as being in institutions are those who permanently reside in institutions and those temporarily residing in institutions whose home addresses are unknown.

Cases of Tuberculosis under observation by Tuberculosis Nurses at 31st December, 1924.

Municipal Wards, etc.	Pulmonary			Non-Pulmonary			Grand Totals
	Males	Females	Totals	Males	Females	Totals	
Central	26	15	41	5	7	12	53
Lodging Houses, etc.	2	...	2	...	...	...	2
South	21	19	40	6	9	15	55
Lodging Houses, etc.	1	...	1	...	...	...	1
Cathays	53	20	73	9	11	20	93
Adamsdown ...	28	30	58	14	11	25	83
Lodging Houses, etc.	11	...	11	3	...	3	14
Riverside	28	16	44	5	12	17	61
Canton	25	33	58	7	8	15	73
Grangetown ...	29	21	50	7	8	15	65
Roath	19	23	42	7	6	13	55
Plasnewydd ...	33	15	48	8	8	16	64
Splott	53	44	97	17	20	37	134
Penylan	22	17	39	2	12	14	53
Llandaff	26	19	45	8	7	15	60
Gabalfa	19	17	36	5	6	11	47
Totals	396	289	685	103	125	228	913

Cases of Suspected Tuberculosis (unnotified) under observation by Tuberculosis Nurses at 31st December, 1924.

Municipal Wards	Males	Females	Totals
Central	6	3	9
South	4	2	6
Cathays	3	...	3
Adamsdown ...	7	4	11
Riverside	2	4	6
Canton	6	5	11
Grangetown ...	5	8	13
Roath	2	7	9
Plasnewydd ...	4	4	8
Splott	9	9	18
Penylan ... ..	...	2	2
Llandaff	2	5	7
Gabalfa	9	4	13
Totals	59	57	116

The actual number of known cases is 1,120 as compared with 1,099 last year. The records may now be regarded as fairly accurate and the stable figure of cases as about eleven hundred.

During the year the tuberculosis nurses made 470 first visits and 2,592 revisits to cases of tuberculosis and suspected cases.

Occupational Incidence.—It is difficult to classify, according to the Registrar General's system, the occupations of new cases recorded by the tuberculosis nurses. A beginning has been made, however, to collate the information in such a way that some use may be made of it when it has covered a sufficiently long period. The question is obviously important in relation to our high incidence of tuberculosis. The following tables show the occupational incidence among 284 males and 212 females notified during 1924 to be suffering from tuberculosis.

MALES.

	Pulmonary	Non-Pulmonary	Totals
Accountants	2	...	2
Insurance, Commission, etc., Agents	2	1	3
Commercial Travellers	3	...	3
Clerks, Typists, etc.	19	2	21
Medical Practitioners	1	...	1
School Teachers ... ..	...	1	1
Students	1	...	1
Police Constables	3	...	3
Warders	1	...	1
Shopkeepers and Shop Assistants	6	1	7
Butchers	1	...	1
Fishmongers	2	...	2
Publicans and Boarding House Keepers	1	1	2
Hairdressers	3	...	3
Boot Repairers	1	...	1
Tailors	1	...	1
Watchmakers	2	...	2
Printers	1	1	2
Laundry Workers ... ..	...	1	1
Factory Workers	2	...	2
Warehousemen, etc.	6	...	6
Packers	3	...	3
Messengers	4	...	4
Railway Workers	5	1	6
Wagon Builders	1	...	1
Shoeing Smiths	1	...	1
Engineers and Fitters	5	...	5
Electricians ... ..	...	1	1
Instrument Makers	1	...	1
Seamen	47	9	56
Pilots	1	...	1
Riggers	1	...	1
Plasterers	2	...	2
Masons	2	...	2
Painters	1	2	3
Plumbers	1	...	1
Carpenters and Joiners	2	...	2
Tile, etc., Layers	2	...	2
Iron Workers	2	...	2
Steel Workers	1	1	2
Pattern Makers	1	...	1
Machinists	1	...	1
Colliers	1	...	1
Coal Tipplers	1	...	1
Brick Makers	1	...	1
Chauffeurs and Motor Drivers	2	...	2

Foreign 36
British 11
47

Foreign 8
British 1
9

Foreign 44
British 12
56

Occupational Incidence—Males (con.)

	Pulmonary	Non-Pulmonary	Totals
Hauliers	7	...	7
Hawkers	1	...	1
Labourers (various)	30	4	34
Gardeners	1	...	1
Ex-Soldiers and Sailors	7	...	7
Miscellaneous	11	1	12
No occupation or unknown	9	9	18
Children of School Age	2	13	15
Children under School Age	6	14	20
Totals	221	63	284

FEMALES.

	Pulmonary	Non-Pulmonary	Totals
School Teachers	1	...	1
Clerks, Typists, etc.... ..	6	1	7
Nurses	2	...	2
Shopkeepers and Shop Assistants	8	1	9
Waitresses	2	1	3
Laundry Workers	5	...	5
Milliners	1	...	1
Tailloresses	1	1	2
Factory Workers	2	...	2
Packers	1	...	1
Domestic Servants	20	2	22
Charwomen	2	...	2
Housewives	73	6	79
Miscellaneous	5	...	5
No occupation or unknown	22	14	36
Children of School Age	8	11	19
Children under School Age	5	11	16
Totals	164	48	212

The most notable feature is the heavy proportion of cases among seamen. But hasty conclusions from such figures must be avoided. A much more elaborate analysis would have to be made showing the cases in age-groups against the estimated population in the various occupations similarly sub-divided according to age.

Treatment.—The following tables give particulars of Cardiff cases examined and treated under the scheme of the Welsh National Memorial Association during 1924. These have been compiled from the quarterly returns of the Association,

EXAMINATIONS AT THE TUBERCULOSIS INSTITUTE.

		Under observation pending diagnosis on first day of year	Applying for the first time during year	Totals	Found to be suffering from Tuberculosis		No evidence of active Tuberculosis	Ceased attendance before completion of diagnosis	Under observation pending diagnosis on last day of year
					Pulmonary	Non-Pulmonary			
Adults	Male	137	218	355	101	9	109	3	133
	Female	80	184	264	78	5	80	7	94
Children (under 15 years)	Male	47	91	138	5	9	51	2	71
	Female	63	76	139	4	10	54	2	69
Totals		327	569	896	188	33	294	14	367

HOSPITAL TREATMENT.

(a) Pulmonary.

		Under treatment on first day of year	Admitted during the year	Totals	Discharged	Deaths	Under treatment on last day of year
Adults	Male	19	48	67	39	16	12
	Female	10	35	45	20	11	14
Children (under 15 years)	Male	1	5	6	2	1	3
	Female	3	1	4	2	1	1
Totals		33	89	122	63	29	30

(b) Non-Pulmonary.

		Under treatment on first day of year	Admitted during the year	Totals	Discharged	Deaths	Under treatment on last day of year
Adults	Male	5	10	15	12	...	3
	Female	4	4	8	6	1	1
Children (under 15 years)	Male	7	6	13	6	...	7
	Female	5	5	10	5	...	5
Totals		21	25	46	29	1	16

SANATORIUM TREATMENT.

Pulmonary Cases.

			Under treat- ment on first day of year	Admitted during the year	Totals.	Discharged	Deaths	Under treat- ment on last day of year
Adults	{	Male ...	24	35	59	38	3	18
		Female ...	5	20	25	21	...	4
Children (under 15 years)	{	Male ...	1	4	5	1	...	4
		Female ...	5	3	8	5	...	3
Totals ...			35	62	97	65	3	29

INSTITUTE TREATMENT.

(a) Pulmonary Cases.

			Under treat- ment on first day of year	New cases during year	Resuming treat- ment during year	Trans- ferred from residential treatment or other areas	Totals	Dis- charged	Deaths	Under treat- ment on last day of year
Adults	{	Male ...	9	4	3	...	16	4	1	11
		Female ...	11	11	3	...	25	12	1	12
Children (under 15 years)	{	Male ...	3	1	...	...	4	2	...	2
		Female ...	3	...	...	...	3	1	...	2
Totals ...			26	16	6	...	48	19	2	27

(b) Non-Pulmonary Cases.

			Under treat- ment on first day of year	New cases during year	Resuming treat- ment during year	Trans- ferred from residential treatment or other areas	Totals	Dis- charged	Deaths	Under treat- ment on last day of year
Adults	{	Male ...	4	1	...	...	5	2	...	3
		Female ...	7	1	...	...	8	4	...	4
Children (under 15 years)	{	Male ...	4	2	...	...	6	4	...	2
		Female ...	6	2	...	...	8	2	...	6
Totals ...			21	6	...	...	27	12	...	15

TREATMENT AT HOME BY MEDICAL PRACTITIONERS IN CONSULTATION WITH
TUBERCULOSIS PHYSICIAN.

(a) Pulmonary Cases.

			Under treat- ment on first day of year	New cases during year	Resuming treat- ment during year	Trans- ferred from residential treatment or other areas	Totals	Dis- charged	Deaths	Under treat- ment on last day of year
Adults	Male	...	72	60	43	2	177	61	40	76
	Female	...	45	49	18	...	112	36	38	38
Children (under 15 years)	Male	...	...	4	...	...	4	2	...	2
	Female	...	3	2	1	...	6	2	3	1
Totals ...			120	115	62	2	299	101	81	117

(b) Non-Pulmonary Cases.

			Under treat- ment on last day of year	New cases during year	Resuming treat- ment during year	Trans- ferred from residential treatment or other areas	Totals	Dis- charged	Deaths	Under treat- ment on last day of year
Adults	Male	...	1	2	1	...	4	4	...	...
	Female	...	6	...	...	...	6	1	1	4
Children (under 15 years)	Male	...	...	1	1	...	2	...	...	2
	Female	...	...	1	...	...	1	...	...	1
Totals ...			7	4	2	...	13	5	1	7

Bovine Tuberculosis.—Statistics bearing on this aspect will be found in Section 10, which deals with food inspection.

Section 4.

NON-NOTIFIABLE INFECTIOUS DISEASES.

The following shows the number of cases of non-notifiable infectious disease which came to the knowledge of the Department, mainly through school teachers' returns, compared with the previous year :—

			1924		1923
Measles	...	...	802	...	523
German Measles	...	...	3	...	4
Whooping Cough	...	...	241	...	122
Mumps	...	...	220	...	116

Measles.—Toward the end of the year measles took on epidemic prevalence after a prolonged period of abatement. As usual one ward was affected after another. Altogether 35 deaths occurred before 31st December, giving a death-rate of 0·15 per 1,000, compared with 0·11 in 1923. Grangetown and Adamsdown had the highest number of deaths, the former accounting for 8, the latter for 6.

Whooping Cough.—There was also an increase of mortality from this disease, 44 deaths occurring. The death-rate was 0·19 per 1,000, as against 0·14 in 1923. Gabalfa, South, Adamsdown and Grangetown were most seriously affected, the number of deaths in these wards being 9, 8, 5 and 5 respectively.

Diarrhoea.—The cold, wet summer was attended with a slightly lower incidence of diarrhoea among infants, 53 children under 2 years dying of this disease, the mortality per 1,000 births being 10·8 as compared with 13·9 in 1923. The mortality was highest in Plasnewydd, Splott, Gabalfa and Adamsdown.

Influenza.—Influenza exhibited one of its periodic minor recrudescences in January, causing a brief disorganisation of school attendance and definitely increasing the incidence of pneumonia and the respiratory death-rate. As in previous Reports, the following table is included to illustrate the effect of these recurring epidemics on the mortality from all causes and from those causes definitely connected with the respiratory system :—

Year.	(1) Deaths from All Causes.	(2) Deaths from In- fluenza and Respiratory Diseases.	(3) Percentage of (2) in (1).
1917	2,433	471	19·4
1918	3,188	1,073	33·6
1919	2,652	666	25·1
1920	2,411	424	17·6
1921	2,452	429	17·5
1922	2,704	758	28·0
1923	2,721	484	17·8
1924	2,740	597	21·8

Anthrax.—Attention has again been devoted to the existence of anthrax spores in hide thongs used for binding orange boxes. The following is a record of reports by Dr. Parry Morgan on specimens submitted to him by the staff at the Port:—

Date	Consignment Labelled	Result
1924		
21st January ...	"Francisca Carratala," Aleira ...	Negative.
21st " ...	"Lion Brand," Puertas, Villarreal ...	Negative.
21st " ...	"Young, England," Aleira ...	Negative.
21st " ...	"Federico Garcia E. Hijos," Valencia ...	Negative.
28th " ...	"Jose Ron Ferrada," Burriana ...	Negative.
28th " ...	"Cerezo Granell," Burriana ...	Negative.
28th " ...	"Ramon Slopis," Burriana ...	Negative.
28th " ...	"Ismael Llansola," Valencia ...	Negative.
28th " ...	"Pilot Brand," Burriana ...	Negative.
28th " ...	"Armelo Chilet," Alba ...	Positive.
8th February ...	"Polie Devis Emperador," Burriana ...	Positive.
8th " ...	"Vicente Cabobonell," Valencia ...	Negative.
8th " ...	"Bautista Munoz," Burriana ...	Negative.
8th " ...	"Vicente Cabo," Valencia ...	Negative.
19th March ...	"G.M." Burriana ...	Negative.
19th " ...	"Dolores Martinez Enrique," Burriana ...	Negative.
19th " ...	"Jose Ferrada," Burriana ...	Negative.
19th " ...	"El Barquillero Ferrada," Aleira ...	Negative.
16th April ...	"Vicente Marti Carcella," Burriana ...	Negative.
16th " ...	"Encarnacion Ferrada," Burriana ...	Negative.
16th " ...	"P. Masipy Hermanos," Carcagente ...	Negative.
16th " ...	"Masipy Peris," Carcagente ...	Negative.

Venereal Diseases.—The following is a summary of the returns from treatment centres established under the Public Health (Venereal Diseases) Regulations, 1916:—

	Cardiff Royal Infirmary	Royal Hamadryad Seamen's Hospital*	Institutions elsewhere than in Cardiff	Totals
A. Number of persons residing in Cardiff dealt with during the year for the first time and found to be suffering from:—				
Syphilis ...	259	221	8	488
Soft Chancre ...	8	120	2	130
Gonorrhœa ...	224	249	6	479
Conditions other than Venereal ...	97	25	1	123
Totals ...	588	615	17	1,220
B. Number of attendances of all patients residing in Cardiff ...	8,699	16,212	156	25,067
C. Aggregate number of "in-patient days" of all patients residing in Cardiff ...	14	2,697	85	2,796
D. Number of doses of arsenobenzol compounds given to patients residing in Cardiff ...	1,682	1,205	7	2,894

* The figures in this column relate to all seamen treated whether residents of Cardiff or not

Examination of pathological material:—

	For detection of		For Wasserman Reaction
	Spirochaetes	Gonococci	
Specimens examined at Treatment Centres:—			
Cardiff Royal Infirmary	17	224	686
Royal Hamadryad Seamen's Hospital	104	138	...
Specimens examined at the Cardiff and County Public Health Laboratory	13	198	964

The number of doses of arsenobenzol compounds supplied to medical practitioners, other than at treatment centres, during the year was 580.

Section 5.

MATERNITY AND CHILD WELFARE.

It is difficult to convey by means of statistical returns any idea of the amount and value of the work done by this section of the Department, where success depends so much on personal contact between mothers and children on the one hand and the medical and nursing staff on the other. Under the keen and sympathetic supervision of Dr. Adams, this work is attended, I believe, with very great success. The organisation, however, would be improved if it were found administratively convenient to amalgamate the school medical nursing staff and the health visitors, as already done in the case of the medical staff. As it is, the records in this part of the Report do not cover all the work of the health visitors, part being concerned with other diseases which are dealt with elsewhere for convenience.

Notification of Births and Still-births.—The following statement shows the number of births and still-births notified during the year:—

	Births.	Still-births.
By Medical Practitioners	62	5
By Midwives	4,362	199
By Parents	43	—
From Cardiff Royal Infirmary	478	56
From City Lodge	69	3
Totals	5,014	263

Child Welfare Consultations.—The following is a record of the work done at the several centres:—

Centre	Consultations	First Attendances	Total Attendances
City Hall	114	561	5,437
South	48	127	1,368
Glossop Terrace	91	260	2,894
Canton	94	496	6,236
Grangetown	92	437	5,219
Splott	93	511	5,923
Gabalfa	52	335	4,333
Llandaff North	48	106	1,213
Ely	26	129	1,338
Totals	658	2,962	33,961

Antenatal Consultations.—Corresponding information as to the antenatal clinics is given in the following statement:—

Centre	Consultations	First Attendances	Total Attendances
City Hall	52	134	300
Glossop Terrace	52	191	506
Totals	104	325	806

Dental Clinic.—The following is a record of the year's work :—

	Mothers	Children	Totals
Inspected	70	61	131
Treated	77	66	143
Attendances	135	103	238
Teeth extracted	195	202	397
Teeth filled	18	27	45
Dressings	30	7	37
Scalings	19	...	19
Anæsthetics administered :—			
General	42	57	99
Local	14	...	14

Dentures supplied :—

Full upper	10
Partial upper	7
Full lower	6
Partial lower	8
Cost of dentures	£26 9s.
Amount reclaimed and recovered from patients	£1 6s.

Institutional Treatment.—Expectant mothers in necessitous circumstances or suffering from abnormalities of pregnancy and emergency labour cases sent by practitioners were treated at the Royal Infirmary (Maternity Branch) in the following numbers :—

Number of cases admitted—

Mothers sent from Clinics	23
" " by Practitioners	44
Total	67

Domiciliary Visits by Health Visitors.—The following is a summary of the visits by the health visitors in connection with maternity and child welfare :—

Births—First visits...	...	...	...	4,443
Routine visits	{ Infants under 1 year	...	...	4,740
	{ Children over 1 year	...	...	14,043
	{ Clinic cases	...	...	154
Expectant Mothers	{ First visits	...	...	366
	{ Re-visits	...	...	59
Visits regarding—				
Infant deaths	...	...	...	324
Still-births	...	...	...	169
Ophthalmia Neonatorum	{ First visits	...	...	90
	{ Re-visits	...	...	300
Puerperal Fever	...	...	...	9
Financial circumstances	...	...	...	280
Other visits	...	...	...	3,047

Supply of Free Milk.—Milk was supplied free of charge in necessitous cases and on medical certificate to the following extent:—

	Fresh Milk.		Dried Milk.	
	Individual Cases	Pints of Milk Granted	Individual Cases	Pounds Granted
Children	167	9,702	116	2,898
Mothers	159	8,546½	...	...
Totals	326	18,248½	116	2,898

Training of Midwives.—Twelve women received free studentships for attendance at the course of lectures given in the University College, and four selected by examination were provided with scholarships for practical training—three at the Queen Victoria's Jubilee Institute for Nurses and one at the Maternity Hospital (Cardiff Royal Infirmary).

Midwives Practising in Cardiff.—The number of midwives practising in Cardiff at the end of the year was 127. These may be classified as follows:—

According to qualifications:—

<i>Bona Fide</i> ... ..	...	...	24
Certificate of London Obstetrical Society	...	...	5
Certificate of Central Midwives' Board	...	...	98
Total	...	...	127

According to type of practice:—

Attached to public institutions	...	...	27
Conducting private maternity homes	...	...	14
Dealing with less than five cases per annum	...	...	8
Monthly nurses	...	...	11
Others	...	...	67
Total	...	...	127

Officers of the Department made 293 visits to midwives, from whom 684 records of sending for medical help were received, and midwives' appliances were disinfected in nine instances.

The following is a record of the work of midwives in Cardiff during the year in relation to the births which were the subject of visits by the health visitors:—

Attendances at births by midwives*:—

(a) Alone	...	...	...	2,917
(b) With a medical practitioner	...	...	...	1,180

Attendances at still-births by midwives*:—

(a) Alone	...	...	...	86
(b) With a medical practitioner	...	...	...	118

* Other than those engaged in midwifery at the Cardiff Royal Infirmary and the City Lodge.

Medical Practitioners called in by Midwives in Emergency.—During the year the number of instances in which medical practitioners were called in by midwives in emergency was 684, and claims for emergency fees were made by practitioners in 206 cases. The fees claimed totalled £353 10s. 6d., and in 52 instances fees amounting to £63 3s. 2d. were reclaimed from patients. The sum actually recovered during the year was £63 16s. 5d. (including sums reclaimed in 1923). The proportion recovered of the amount paid to practitioners was 18 per cent.

Home Nursing.—The following is a record of the work done by the Queen Victoria's Jubilee Institute for Nurses for the Department :—

Cases referred to the Institute during 1924 :—

Puerperal Fever ...	...	...	6
Ophthalmia Neonatorum ...	...	...	56
Measles ...	...	...	5
Whooping Cough ...	...	...	2
Infantile Paralysis ...	...	...	1
Impetigo ...	...	...	24
Otorrhœa ...	...	...	56
Other Diseases ...	...	...	76
Total	...	...	226

Visits during 1924 :—

To cases referred during 1924	...	...	5,922
1923	...	...	154
			<hr/>
Total	...	...	6,076

Home Helps.—"Home Helps" were provided by the Department in 10 cases in which mothers confined at home were without adequate domestic help and without means of obtaining it.

Orthopædic Scheme.—In connection with the scheme mentioned in the introduction, the following classification of all cases known to the department on 31st August, 1925, is introduced to indicate the extent of the problem which an effort is being made to solve:—

Cause of Crippling	Under 5 years	5-16 years	Over 16 years	Totals
Poliomyelitis	66	75	2	143
Other Palsy	7	24	...	31
Congenital Malformations	8	16	...	24
Trauma ... ..	...	3	1	4
Rickets	12	13	...	25
Tuberculosis (Non-active) ... ..	...	25	1	26
Other ... ..	...	32	1	33
Totals	93	188	5	286

It will be observed that one-half of the known cases are the result of poliomyelitis (infantile paralysis), indicating that the problem of preventing crippling is largely a question of preventing this infectious disease as well as dealing at an early stage with its disabling effects. It should also be noted that the only group which is even approaching complete registration is that of school age. The known cases over school age are a mere fraction of all the cases which must exist.

Section 6.

HOSPITAL PROVISION.

The hospitals provided or subsidised by the Local Authority are as follows :—

Service	Name	Situation	Accommodation	Financial relationship with the Local Authority
Maternity ...	Maternity Hospital (Cardiff Royal Infirmary)	Glossop Terrace	31 beds & 25 cots	The Local Authority gives an annual grant of £1,000, to be increased to £1,200 for the financial year 1925-6. All Cardiff cases, except emergencies, admitted through the Joint Antenatal Clinic of the Corporation and the Cardiff Royal Infirmary.
Infectious Disease ...	Cardiff Isolation Hospital	Grangetown ...	168 beds ...	Provided by Local Authority
Smallpox ...	Cardiff Small-pox Hospital	Grangetown ...	40 beds ...	ditto.

Section 7.

LABORATORY WORK.

Cardiff and County Public Health Laboratory.—The following statement shows the work carried out for Cardiff during 1924.

Bacteriological Examinations:—

Water Supplies	...	...	...	...	299
Milks for Tubercle Bacilli	...	...	...	...	58
Milks for other Organisms	...	...	...	...	230
Diseased Meat	...	...	...	...	4
Sputa for Tubercle Bacilli	...	...	...	...	668
Urines for Tubercle Bacilli	...	...	...	...	10
Rodents for Plague	...	...	...	...	116

Specimens for—

Diphtheria	...	...	...	...	631
Typhoid Fever	...	...	...	...	43
Malaria	...	...	...	...	38
Dysentery	...	...	...	...	2
Gonorrhœa	...	...	...	...	198
Syphilis (Wassermann Re-action)	...	...	...	...	964
Syphilis (<i>Spirochæta Pallida</i>)	...	...	...	...	13
Ringworm	...	...	...	...	25
Fæces for Organisms	...	...	...	...	64
Cerebro-spinal Fluids	...	...	...	...	8
Hide thongs for Anthrax	...	...	...	...	25
Other Examinations	...	...	...	...	68

Chemical Examinations:—

Water Supplies	...	...	...	...	150
Milk and Milk Products	...	...	...	...	230
Urine Analyses	...	...	...	...	3
Other Examinations	...	...	...	...	10

Total ... 3,957

The number of specimens examined for suspected disease in patients resident in Cardiff, together with the results of such examinations, are shown below:—

Suspected Disease	Positive Results	Negative Results	Totals	Percentage of Positive Results
Diphtheria	88	543	631	13.9
Typhoid Fever	17	26	43	39.5
Tuberculosis	176	492	668	26.3
Gonorrhœa	53	145	198	26.7
Syphilis—				
Wassermann Re-action	303	661	964	31.4
<i>Spirochæta Pallida</i>	6	7	13	46.1

The above figures relate to specimens and samples actually examined during 1924.

Section 8.

ACTS, BYELAWS AND REGULATIONS.

ADOPTIVE ACTS IN FORCE IN THE CITY OF CARDIFF.

Infectious Diseases (Prevention) Act, 1890.—Adopted 19th February, 1891, coming into force on 1st May, 1891.

Public Health Acts Amendment Act, 1890, *Parts II. & III.*—Adopted 5th March, 1891, coming into force on 1st May, 1891.

Public Health Acts Amendment Act, 1907.—Certain Sections adopted 26th January, 1909, coming into force on 16th March, 1909.

BYE-LAWS AND REGULATIONS IN FORCE IN THE CITY OF CARDIFF.

Bye-laws as to the Cleansing of Earth-closets, Privies, Ashpits and Cesspools, dated 6th July, 1881.

Bye-laws for Prevention of Nuisances arising from Snow, Filth, Dust, Ashes and Rubbish, and for the Prevention of the Keeping of Animals on any Premises so as to be Injurious to Health, dated 6th July, 1881.

Bye-laws as to Slaughter-houses, dated 10th September, 1888.

Bye-laws as to Common Lodging Houses, dated 13th March, 1891.

Bye-laws with respect to Houses Let in Lodgings, dated 13th March, 1891.

Bye-laws for the Regulation of Offensive Trades.—Blood boiler, blood drier, bone boiler, fat melter, fellmonger, glue maker, gut scraper, leather dresser, size maker, soapboiler, tallow-melter, tanner, tripe boiler, dated 12th July, 1893.

Bye-laws as to Seamen's Lodging Houses, dated 30th April, 1896.

Bye-laws with respect to New Streets and Buildings, dated 21st March, 1900.

Bye-laws for the Good Rule and Government of the City of Cardiff, dated 26th September, 1904.

Bye-laws as to Management of Mortuary, dated 7th February, 1905.

Bye-laws as to Refuse and Night Soil. For regulating the hours during which and the mode and nature of the conveyance in which any refuse, night soil, or offensive or noxious substance, matter or liquid, may be removed from any place in or be carried in, through or out of the City, dated 11th December, 1907.

Dairies, Cowsheds and Milkshops Regulations, dated 10th February, 1908.

Bye-laws with respect to the provision of Means of Escape in case of Fire in certain Factories and Workshops, dated 19th September, 1908.

Bye-laws as to the Cleansing of Footways and Pavements, dated 10th November, 1909.

Section 9.

HOUSING.

The question of overcrowding has been dealt with at some length in previous Reports. There is little evidence of improvement in spite of the increased activity in building dwelling-houses. The statement included under the heading "Tuberculosis" illustrates the general state of housing, but a special enquiry is now being made as to the amount of sex-overcrowding in the city.

The following is a statement in the form required by the Ministry in relation to housing :—

Number of new houses erected during the year :—

(a) Total	...	...	...	...	...	...	...	664
(b) With State assistance under the Housing Acts, 1919, 1923 or 1924 :—								
(i) By the Local Authority	...	...	...	...	...	...	...	176
(ii) By other bodies or persons	...	...	...	...	...	...	...	34

1. *Unfit dwelling-houses.*

Inspection—(1) Total number of dwelling-houses inspected for housing defects (under Public Health or Housing Acts)	...	...	...	...	...	...	...	1,674
(2) Number of dwelling-houses which were inspected and recorded under the Housing (Inspection of District) Regulations, 1910	...	...	...	...	...	...	...	1,462
(3) Number of dwelling-houses found to be in a state so dangerous or injurious to health as to be unfit for human habitation	...	...	...	...	...	...	...	—
(4) Number of dwelling-houses (exclusive of those referred to under the preceding sub-heading) found not to be in all respects reasonably fit for human habitation	...	...	...	...	...	...	...	1,361

2. *Remedy of Defects without Service of formal Notices.*

Number of defective dwelling-houses rendered fit in consequence of informal action by the Local Authority or their Officers	1,136
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3. *Action under Statutory Powers.*

A.—Proceedings under section 28 of the Housing, Town Planning, etc., Act, 1919.

(1) Number of dwelling-houses in respect of which notices were served requiring repairs	...	...	...	...	...	...	...	—
(2) Number of dwelling-houses which were rendered fit after service of formal notices :—								
(a) by owners	...	...	...	...	...	...	...	—
(b) by Local Authority in default of owners	...	...	...	...	...	...	...	—
(3) Number of dwelling-houses in respect of which Closing Orders became operative in pursuance of declarations by owners of intention to close...	...	...	...	...	...	...	...	—

B.—Proceedings under Public Health Acts.

(1) Number of dwelling-houses in respect of which notices were served requiring defects to be remedied	...	...	...	...	...	...	...	140
(2) Number of dwelling-houses in which defects were remedied after service of formal notices :—								
(a) by owners	...	...	...	...	...	...	...	169
(b) by Local Authority in default of owners	...	...	...	...	...	...	...	—

C.—Proceedings under sections 17 and 18 of the Housing, Town Planning, etc., Act, 1909.

(1) Number of representations made with a view to the making of Closing Orders	...	...	...	...	...	...	...	—
(2) Number of dwelling-houses in respect of which Closing Orders were made	...	...	...	...	...	...	...	—
(3) Number of dwelling-houses in respect of which Closing Orders were determined, the dwelling-houses having been rendered fit	...	...	...	...	...	...	...	—
(4) Number of dwelling-houses in respect of which Demolition Orders were made	...	...	...	...	...	...	...	—
(5) Number of dwelling-houses demolished in pursuance of Demolition Orders	...	...	...	...	...	...	...	—

Section 10.

FOOD INSPECTION.

Meat Inspection.—The following tables set out in detail the work done in connection with meat inspection during the year.

MUNICIPAL ABATTOIRS.

Animals slaughtered and number found suffering from tuberculosis during 1924 :—

	Roath Abattoir	Canton Abattoir	Totals	Found suffering from Tuberculosis	Percentage suffering from Tuberculosis
Cattle	8,787	930	9,717	554	5.70
Sheep and Lambs	40,112	6,590	46,702	...	...
Calves	9,548	624	10,172	28	0.27
Pigs	34,553	4,251	38,804	332	0.86
Totals	93,000	12,395	105,395	914	0.87

Unsound carcasses of meat surrendered and destroyed or otherwise dealt with by arrangement with the owners :—

Place	Carcasses of				Totals
	Beef	Mutton and Lamb	Veal	Pork	
Roath Abattoir	97	45	35	133	310
Canton Abattoir	7	6	...	15	28
Totals	104	51	35	148	338

Causes of destruction of carcasses :—

Cause.	Beef	Mutton and Lamb	Veal	Pork	Totals
Tuberculosis	85	2	21	114	222
Dropsy	3	19	...	2	24
Emaciation	4	5	1	2	12
Dropsy & Emaciation	1	11	...	...	12
Johne's Disease	7	...	...	...	7
Moribund ... ..	...	1	1	4	6
Found dead ... ..	...	1	...	...	1
Decomposition ... ..	...	7	1	...	8
Other Causes	4	5	11	26	46
Totals	104	51	35	148	338

Approximate weight of diseased or unsound meat surrendered and destroyed or otherwise dealt with by arrangement with the owners :—

							Tons	cwt.	lbs.
Carcases of—									
Beef	...	...	...	...	...	...	24	8	84
Veal	...	...	...	...	...	...	1	3	54
Mutton and Lamb	...	...	...	...	...	...	0	17	1
Pork	...	...	...	...	...	...	6	3	49
Part carcasses of—									
Beef	...	...	...	...	...	...	1	18	39
Veal	...	...	...	...	...	...	0	0	72
Mutton and Lamb	...	...	...	...	...	...	0	0	106
Pork	...	...	...	...	...	...	0	17	98
Offals of—									
Beasts	...	...	...	...	...	...	21	3	59
Calves	...	...	...	...	...	...	0	5	20
Sheep and Lambs	...	...	...	...	...	...	1	13	44
Pigs	...	...	...	...	...	...	3	12	64
Total							62	5	18

PRIVATE SLAUGHTER-HOUSES.

The numbers of animals slaughtered were as follows :—

Cattle	...	...	...	...	...	...	7
Sheep and Lambs	...	...	...	...	...	...	227
Calves	...	...	...	...	...	...	...
Pigs	...	...	...	...	...	...	19
Total							253

One carcase of mutton was found to be unsound, the cause being dropsy and emaciation.

The total weight of unsound meat surrendered at private slaughter-houses and destroyed by arrangement with the owners was 42 pounds.

Unsound Food exposed or intended for Sale.—The following is a record of the work done by the assistant sanitary inspectors in this connection during the year :—

Number of inspections of shops, stores, etc. :—

Butchers' shops	...	...	...	...	...	1,522
Provision shops	...	...	...	...	...	266
Markets	...	...	...	...	...	640
Wholesale stores	...	...	...	...	...	362
Fish and fruit shops	...	...	...	...	...	208
Poultry shops	...	...	...	...	...	37
Butter factories	...	...	...	...	...	96
Margarine stores (wholesale)	...	...	...	...	...	141
Railway stations	...	...	...	...	...	16
Other premises	...	...	...	...	...	545
Total						3,833

Approximate weight of diseased or unsound food found in shops and stores and destroyed or disposed of by the owners otherwise than as food for human consumption :—

	Tons	cwts.	lbs.
Beef	0	11	37
Veal, etc.	0	0	24
Mutton, Lamb, etc.	0	1	48
Pork, etc.	0	1	75
Rabbits and Hares	0	13	42
Fish	0	2	6
Provisions	0	13	6
Fruit	6	7	48
Poultry	0	0	107
Offal	0	3	41
Vegetables	1	5	108
Total	10	0	94

Milk Inspection.—In connection with the Milk and Dairies (Amendment) Act, 1922, the principle has been adopted that every dairyman must have premises apart from his dwelling-house or cowshed for the storage of milk and vessels and for the cleansing of the latter. Steps have also been taken to exclude the milk business from shops where other articles are sold which are likely to contaminate the milk, unless it is purchased from the wholesaler in sealed bottles and sold unopened. The following is a statement showing the distribution of the milk business in Cardiff and the amount of milk sold in December, 1924 :—

Character of Business carried on by Milk Vendors.

(1) Selling milk from shops, with or without rounds	227
(2) Selling milk from dwelling-houses, with or without rounds	67
(3) Selling milk by rounds only	166
(4) Selling milk from farms within the city boundary	19
(5) Selling milk from farms outwith the city boundary	88
Total	567

Vendors selling 6 gallons or less per day—

(a) included in (1) above	183
(b) „ „ (2)	11
(c) „ „ (3)	13
Total	207

Total number of gallons sold per day by all vendors ... 11,387 (approximately).

INSPECTION OF COWSHEDS, MILKSHOPS, ETC.

Inspections of Milkshops, etc.	2,954
Notices requiring sanitary defects to be remedied—	
Served	28
Complied with	24
Inspections of Cowsheds	624
Notices requiring sanitary defects to be remedied—	
Served	6
Complied with	6

It is impossible to bring out by statistical records the very great amount of time and effort spent by Chief Inspector Evans and his staff on this work.

Tubercle Bacilli in Milk.—The number of samples examined in virtue of the powers granted by the Cardiff Corporation Act, 1900, was 53, only one of which was found to contain tubercle bacilli. The record of sampling from the commencement is shown in the following table :—

Milk Supplies examined for Tubercle Bacilli.

Year				Number of Samples.	Number containing Tubercle Bacilli.	
1911	...	...	...	9	...	—
1912	...	...	...	45	...	5
1913	...	...	...	42	...	1
1914	...	...	...	39	...	—
1915	...	...	...	45	...	—
1916	...	...	...	41	...	1
1917	...	...	...	32	...	—
1918	...	...	...	19	...	1
1919	...	...	...	13	...	—
1920	...	...	...	14	...	1
1921	...	...	...	27	...	2
1922	...	...	...	43	...	2
1923	...	...	...	51	...	2
1924	...	...	...	53	...	1

Routine Bacteriological Examination of Milk.—The following record is produced here for comparison with similar tables contained in previous Reports :—

Month	Number of Samples examined	Number containing not more than 200,000 bacteria in 1 c.c.	Number with <i>B. Coli</i> absent in 1/100 c.c.	Number attaining Grade A standard by both tests	Percentage attaining Grade A standard
January ...	14	11	11	10	75
February ...	10	10	8	8	
March ...	10	8	10	8	
April ...	8	8	7	7	
May... ..	11	8	8	7	64
June ...	8	5	6	5	
July ...	10	9	9	8	
August ...	7	4	4	3	
September ...	9	5	4	4	41
October ...	10	7	4	3	
November ...	7	5	3	2	
December ...	6	6	4	4	
Totals ...	110	86	78	69	63

These are samples of ordinary commercial milk, the results of the bacteriological examination being shown in such a way as to reveal what proportion attained the standard prescribed by the Milk (Special Designations) Order, 1923, for Grade A milk. Throughout the year 63 per cent. reached this standard, as compared with 62 per cent. in 1923, and 54 in 1922. The percentage in the warm months was 64, against 43 in 1923, and 11 in 1922. On the whole these results are satisfactory and indicate further improvement in the production and handling of milk.

Graded Milks.—The following is a statement of the producers and dealers in the various categories licensed to sell milk under the Milk (Special Designations) Order, 1923 :—

Description of Licences.	Number in force on 31st December, 1924.
(1) Producers' licences to use the designation "Grade A"	(1) One
(2) Dealers' licences to use the designation "Certified"	(2) Nil
(3) Dealers' licences to use the designation "Grade A (Tuberculin Tested)"—	
(a) Bottling establishments	(3) (a) Nil
(b) Shops	(3) (b) Nil
(4) Dealers' licences to use the designation "Grade A"—	
(a) Bottling establishments	(4) (a) Three
(b) Shops	(4) (b) Nil
(5) Dealers' licences to use the designation "Pasteurised"—	
(a) Pasteurising establishments	(5) (a) One
(b) Shops	(5) (b) Nil

In addition to the numbers given above two supplementary licences to sell Grade A milk were in force on 31st December, 1924.

The record of bacteriological examinations of these milks is contained in the following tables :—

GRADE A MILK—DEALER A.

Date	Sample from Producer or Dealer	Temperature on Testing	Number of Colonies in 1 c.c.	Presence or Absence of <i>B. Cck</i>
		°C.		
19th January	Dealer	11	18,000	+ 1 c.c.
28th "	Producer	13	29,000	+ 1 c.c.
13th February	Producer	10	12,100	— 1 c.c.
23rd "	Dealer	8	21,000	+ 1 c.c.
8th March	Dealer	8	26,000	— 1 c.c.
29th "	Producer	10	8,500	+ 1 c.c.
29th "	Dealer	10	10,100	+ 1 c.c.
12th April	Producer	11	3,100	— 1 c.c.
12th "	Dealer	11	8,300	+ 1 c.c.
6th May	Producer	12	2,600	+ 1 c.c.
6th "	Dealer	12.5	3,500	+ 1 c.c.
14th June	Producer	14.5	12,000	— 1 c.c.
14th "	Dealer	15.5	48,000	+ 1/100 c.c.
5th July	Producer*	14	1,500	+ 1 c.c.
5th "	Dealer	16	1,100	— 1 c.c.
19th "	Producer	17.5	4,500	+ 1 c.c.
19th "	Dealer	18	6,500	+ 1/10 c.c.
20th August	Producer*	15.5	95,000	+ 1/10 c.c.
20th "	Dealer	16	140,000	+ 1/100 c.c.
23rd "	Producer	16	3,400	— 1 c.c.
23rd "	Dealer	16	4,100	— 1 c.c.
3rd September	Producer*	19	4,000	+ 1 c.c.
3rd "	Dealer	19	5,000	+ 1 c.c.
17th "	Producer	17	69,000	+ 1 c.c.
17th "	Dealer	17.5	84,000	+ 1 c.c.
4th October	Producer	14.5	2,400	— 1 c.c.
4th "	Dealer	14.5	3,300	+ 1 c.c.
8th "	Producer*	14	10,100	+ 1 c.c.
8th "	Dealer	14	3,900	+ 1 c.c.
11th "	Producer	14.5	14,500	+ 1 c.c.
11th "	Dealer	14.5	10,800	+ 1 c.c.
6th November	Producer	11	5,800	— 1 c.c.
6th "	Dealer	11.5	4,900	— 1 c.c.
13th "	Producer*	12	13,600	+ 1 c.c.
13th "	Dealer	12.5	10,800	+ 1 c.c.
22nd "	Producer	13	4,800	+ 1 c.c.
22nd "	Dealer	12.5	6,200	+ 1 c.c.
13th December	Producer	10	16,000	+ 1/10 c.c.
13th "	Dealer	10.5	19,000	+ 1 c.c.
17th "	Producer*	8.5	7,400	+ 1/10 c.c.
17th "	Dealer	9	7,800	+ 1 c.c.
22nd "	Producer	11.5	16,500	+ 1 c.c.
22nd "	Dealer	12	11,400	+ 1 c.c.

* Sample from the supply of the licensed producer in Cardiff.

GRADE A MILK—DEALER B.

Date	Sample from Producer or Dealer				Temperature on Testing	Number of Colonies in 1 c.c.	Presence or Absence of <i>B. Coli</i>
					°C.		
1st January	...	Producer	...	...	13	8,400	— 1 c.c.
19th "	...	Dealer	...	...	11	70,400	+ 1 c.c.
20th February	...	Dealer	...	...	8	8,900	+ 1 c.c.
26th "	...	Producer	...	...	7	9,000	+ 1 c.c.
8th March	...	Dealer	...	...	8	86,000	— 1 c.c.
17th "	...	Producer	...	...	11	3,800	+ 1 c.c.
17th "	...	Dealer	...	...	11	5,100	+ 1 c.c.
17th April	...	Producer	...	...	...	8,200	+ 1 c.c.
17th "	...	Dealer	...	...	...	6,900	— 1 c.c.
10th May	...	Producer	...	...	13.5	14,600	+ 1 c.c.
10th "	...	Dealer	...	...	15	13,500	+ 1 c.c.
21st June	...	Producer	...	...	16.5	8,400	— 1 c.c.
21st "	...	Dealer	...	...	17	10,800	— 1 c.c.
9th July	...	Producer	...	...	19	1,500	+ 1 c.c.
9th "	...	Dealer	...	...	19	1,200	— 1 c.c.
30th August	...	Producer	...	...	17.5	14,000	— 1 c.c.
30th "	...	Dealer	...	...	17.5	12,000	— 1 c.c.
10th September	...	Producer	...	...	14	92,000	+ 1/10 c.c.
10th "	...	Dealer	...	...	14.5	61,000	+ 1 c.c.
1st October	...	Producer	...	...	14	3,700	— 1 c.c.
1st "	...	Dealer	...	...	14	4,600	— 1 c.c.
20th November	...	Producer	...	...	10.5	1,400	+ 1 c.c.
20th "	...	Dealer	...	...	11.5	1,800	+ 1 c.c.
3rd December	...	Producer	...	...	12	8,100	1/10 c.c.
3rd "	...	Dealer	...	...	12.5	17,800	+ 1/10 c.c.

GRADE A MILK—DEALER C.

Date	Sample from Producer or Dealer				Temperature on Testing	Number of Colonies in 1 c.c.	Presence or Absence of <i>B. Coli</i>
					°C.		
22nd January	...	Dealer	...	...	13	13,000	+ 1 c.c.
26th "	...	Dealer	...	...	12	5,100	+ 1 c.c.
25th February	...	Producer	...	...	9	12,100	— 1 c.c.
25th "	...	Dealer	...	...	10	5,100	— 1 c.c.
18th March	...	Producer	...	...	10	7,800	— 1 c.c.
18th "	...	Dealer	...	...	11	9,500	+ 1 c.c.
9th April	...	Producer	...	...	12	2,200	+ 1 c.c.
9th "	...	Dealer	...	...	11	3,400	+ 1 c.c.
17th May	...	Producer	...	...	15	2,000	+ 1 c.c.
17th "	...	Dealer	...	...	15	2,100	+ 1 c.c.
28th June	...	Producer	...	...	17.5	1,500	+ 1 c.c.
28th "	...	Dealer	...	...	18	2,700	+ 1 c.c.
16th July	...	Producer	...	...	18.5	14,200	+ 1 c.c.
16th "	...	Dealer	...	...	18	4,500	+ 1 c.c.
6th August	...	Producer	...	...	19	29,000	+ 1 c.c.
6th "	...	Dealer	...	...	18.5	35,400	+ 1/100 c.c.
12th "	...	Producer	...	...	14	84,000	+ 1 c.c.
13th "	...	Dealer	...	...	16	530,000	+ 1/100 c.c.
23rd September	...	Producer	...	...	12.5	8,100	+ 1/10 c.c.
23rd "	...	Dealer	...	...	13	16,800	+ 1/10 c.c.

GRADE A MILK—DEALER C.—continued.

Date	Sample from Producer or Dealer				Temperature on Testing	Number of Colonies in 1 c.c.	Presence or Absence of <i>B. Coli</i>
					°C.		
15th October ...	Producer	...	...	...	15.5	48,000	+ 1/10 c.c.
15th " ...	Dealer	...	...	...	16	66,000	+ 1/10 c.c.
29th November ...	Producer	...	...	...	13	52,000	+ 1/10 c.c.
29th " ...	Dealer	...	...	...	13	71,000	+ 1/10 c.c.
10th December ...	Producer	...	...	...	13	8,700	+ 1 c.c.
10th " ...	Dealer	...	...	...	13	31,200	+ 1/10 c.c.

GRADE A MILK—DEALER D. (Supplementary Licence).

Date	Sample from Producer or Dealer				Temperature on Testing	Number of Colonies in 1 c.c.	Presence or Absence of <i>B. Coli</i>
					°C.		
26th January ...	Dealer	...	...	...	13	39,000	— 1 c.c.
23rd February ...	"	...	...	...	9	8,500	+ 1/10 c.c.
15th March ...	"	...	...	...	11	3,100	+ 1 c.c.
28th April ...	"	...	...	...	14	25,600	+ 1/10 c.c.
21st May ...	"	...	...	...	15.5	96,000	+ 1/100 c.c.
30th June ...	"	...	...	...	16.5	38,000	+ 1 c.c.
31st July ...	"	...	...	...	16.5	15,600	+ 1/10 c.c.
27th August ...	"	...	...	...	15.5	28,000	+ 1/10 c.c.
27th September ...	"	...	...	...	14.5	6,400	+ 1 c.c.
18th October ...	"	...	...	...	14	17,400	+ 1/100 c.c.
15th November ...	"	...	...	...	12	5,700	— 1 c.c.
20th December ...	"	...	...	...	14	3,900	+ 1/10 c.c.

GRADE A MILK—DEALER E. (Supplementary Licence).

Date	Sample from Producer or Dealer				Temperature on Testing	Number of Colonies in 1 c.c.	Presence or Absence of <i>B. Coli</i>
					°C.		
17th November ...	Dealer	...	...	...	8.5	16,000	+ 1 c.c.
20th December ...	"	...	...	...	14	5,100	+ 1 c.c.

PASTEURISED MILK—DEALER F.

Date	Sample from Producer or Dealer				Temperature on Testing	Number of Colonies in 1 c.c.	Presence or Absence of <i>B. Coli</i>
					°C.		
15th January ...	Dealer	...	...	...	12	12,200	+ 1 c.c.
20th February ...	"	...	...	...	9	6,000	+ 1 c.c.
15th March ...	"	...	...	...	11	4,000	+ 1 c.c.
28th April ...	"	...	...	...	13	11,400	+ 1/10 c.c.
21st May ...	"	...	...	...	14	264,000	+ 1/100 c.c.
30th June ...	"	...	...	...	16.5	24,000	+ 1/10 c.c.
25th July ...	"	...	...	...	17	65,000	+ 1/100 c.c.
27th August ...	"	...	...	...	14	236,000	+ 1/10 c.c.
27th September ...	"	...	...	...	14	17,000	+ 1/10 c.c.
20th October ...	"	...	...	...	14	16,000	+ 1/100 c.c.
15th November ...	"	...	...	...	12	20,000	+ 1/100 c.c.
19th December ...	"	...	...	...	15	76,000	+ 1/10 c.c.

Sale of Food and Drugs Acts.—Samples submitted for analysis :—

Description.	Number	Genuine	Adulterated
Ammoniated Tincture of Quinine			
(Informal)	24	24	...
Butter	1	1	...
Butter (Informal)	36	35	1
Beer (Informal)	24	24	...
Cream of Tartar (Informal)	17	17	...
Milk	590	560	30
Milk (Skimmed)	8	8	...
Milk (Informal)	3	2	1
Sweet Spirits of Nitre (Informal)	18	14	4
Tartaric Acid (Informal)	1	1	...
Raw Cream	2	...	2
Raw Cream (Informal)	17	15	2
Whiskey	6	6	...
Totals	747	707	40

Samples of milk analysed and proportion adulterated :—

	Samples Analysed	SAMPLES ADULTERATED					
		Num- ber	Per- centage	Added Water	Defi- cient Fat	Preserv- atives	Coloured with Annatto
Wholesale—							
Taken at Railway Stations ...	58	3	5.2	...	3	...	...
Retail—							
Taken in shops, from carts, etc.	543	28	5.2	7	16	...	5
Totals	601	31	5.2	7	19	...	5

Public Health (Milk and Cream) Regulations, 1912 and 1917.—A record of the work done in connection with these regulations is given below :—

1. *Milk ; and Cream not sold as Preserved Cream.*

	Number of samples examined for the presence of a preservative	Number in which a preservative was reported to be present
Milk	601	...
Cream	6	4

Nature and percentage of preservative in each case and action taken under the regulations in regard to it :—

	No. of Sample	Nature of Preservative	Percentage of Preservative	Action taken
Cream	385	Boric Acid	0.12	} Informal samples.
"	435	" "	0.52	
"	477	" "	0.15	} In accordance with Art. VI. of the Regulations, 1912. Explanations satisfactory.
"	482	" "	0.29	

2. Cream sold as Preserved Cream.

(a) Instances in which samples have been submitted for analysis to ascertain if the statements on the label as to preservatives were correct :—

(i) Correct statements made	13
(ii) Statement incorrect	—
	13
	—

(b) Determinations made of milk fat in cream sold as preserved cream :—

(i) Above 35 per cent.	13
(ii) Below " " "	—
	13
	—

3. Thickening substances.

There was no evidence of the addition of thickening substances to the samples of cream and preserved cream taken.

Legal Proceedings.—The following is a summary of legal proceedings taken during the year in connection with food inspection :—

Acts, etc., under which Proceedings were taken	Number	Fined	Cautioned	To pay costs only	Dis-missed	With-drawn	Amount of Fines and Costs
Sale of Food & Drugs Acts...	34	22	4	3	2	3	£ s. d. 71 3 8
Dairies, Cowsheds & Milk-shops Regulations ...	1	1	...	...	...	...	0 5 0
Totals	35	23	4	3	2	3	£71 8 8

Section 11.

SANITARY ADMINISTRATION.

In the following tabular statements the nature and extent of the work done during 1924 in connection with the general sanitary inspection of the district, inspection of seamen's and common lodging houses, factories, workshops and shops are given. A summary of legal proceedings, and particulars with regard to disinfection, baths at the Cleansing Station and bodies removed to the Mortuary are also included.

SANITARY INSPECTION OF DWELLING HOUSES, &c.

Complaints of nuisances received	...	...	...	...	1,382
Number of houses inspected for defects	...	...	...	...	1,674
Number of houses inspected and recorded	...	...	...	...	1,462
Re-inspections of houses	...	...	...	...	12,374
Drains tested with smoke	...	...	...	...	229
" " chemicals	...	...	...	...	1,768
Notices served :—					
Informal	...	...	...	...	1,361
Statutory	...	...	...	...	140
Notices complied with :—					
Informal	...	...	...	...	1,136
Statutory	...	...	...	...	169
Towns Improvement Clauses Act, 1847 :—					
Notices re defective shutters served	...	...	...	...	178
" " " complied with	...	...	...	...	174

In connection with the sanitary inspection of dwelling-houses, 4,551 sanitary defects were remedied, details of which are given below :—

Drains unchoked and repaired	...	...	...	...	453
Soil pipes, ventilation shafts and fresh air inlets repaired	...	...	...	...	20
New W.C. pans provided	...	...	...	...	89
New syphon traps provided	...	...	...	...	8
New gully traps provided	...	...	...	...	5
W.C.'s. repaired	...	...	...	...	15
W.C.'s. cleansed	...	...	...	...	50
Flushing apparatus provided	...	...	...	...	1
" " repaired	...	...	...	...	60
Trough outlets and waste pipes repaired	...	...	...	...	65
Roofs repaired	...	...	...	...	715
Shutters repaired	...	...	...	...	761
Down-pipes repaired	...	...	...	...	123
Chimneys repaired	...	...	...	...	51
Inside plastering repaired	...	...	...	...	213
Outside " " "	...	...	...	...	105
Areas repaired	...	...	...	...	9
Yard surfaces repaired	...	...	...	...	346
Yards, etc., cleansed	...	...	...	...	23
Outhouses cleansed or repaired	...	...	...	...	29
Accumulations removed	...	...	...	...	96
Manure receptacles provided	...	...	...	...	—
Inside walls repaired	...	...	...	...	82
Doors repaired	...	...	...	...	94
Floors repaired	...	...	...	...	254
Windows repaired	...	...	...	...	314
Ceilings repaired	...	...	...	...	124
Houses, bedding, etc., cleansed	...	...	...	...	117

Ventilation improved ...	...	...	...	...	9
Water supply provided	...	...	...	...	34
Other nuisances abated	...	...	...	...	286

INSPECTION OF PREMISES PERIODICALLY INSPECTED.

Offensive Trades :—

Number on Register	...	...	...	...	26
Inspections	...	...	...	...	69
Notices served	...	...	...	...	1
Notices complied with	...	...	...	...	1

Miscellaneous Inspections :—

Public houses	...	...	...	...	598
Notices served	...	...	...	...	58
Notices complied with	...	...	...	...	58
Theatres, etc.	...	...	...	...	151
Notices served	...	...	...	...	8
Notices complied with	...	...	...	...	7
Fried-fish shops	...	...	...	...	563
Notices served	...	...	...	...	29
Notices complied with	...	...	...	...	28
Ice-cream shops	...	...	...	...	472
Notices served	...	...	...	...	13
Notices complied with	...	...	...	...	13
Piggeries	...	...	...	...	160
Notices served	...	...	...	...	8
Notices complied with	...	...	...	...	11
Houses let in lodgings	...	...	...	...	343
Notices served	...	...	...	...	54
Notices complied with	...	...	...	...	42
Smoke observations	...	...	...	...	5
Inspections of urinals	...	...	...	...	466
Visits to owners re notices	...	...	...	...	1,007
Other visits and inspections	...	...	...	...	10,669

Common Lodging Houses :—

Common Lodging Houses on Register	14
Day inspections	...	...	...	...	228
Night inspections...	...	...	...	...	81
Notices served	...	...	...	...	14
Notices complied with	...	...	...	...	14

Seamen's Lodging Houses :—

Seamen's Lodging Houses on Register	123
Licences granted	...	...	...	...	135
Licences relinquished	...	...	...	...	12
Day inspections	...	...	...	...	1,443
Night inspections...	...	...	...	...	337
Notices served under Byelaws	...	...	...	...	40
Notices under Byelaws complied with	...	...	...	...	35
Notices served under Public Health Acts	...	...	...	...	42
Notices under Public Health Acts complied with	...	...	...	...	35
Persons cautioned for lodging seamen without being licensed	...	...	...	...	32

RATS AND MICE (DESTRUCTION) ACT, 1919.

Purchases of rat poisons from Public Health Department ...	...	183
Amount of poisons sold ...	29 lbs., 492 tins, and 5 bottles	
Number of baits laid in public sewers ...	...	40,268
Number of baits eaten ...	...	8,482
Number of baits laid elsewhere ...	...	7,729
Number of baits eaten ...	...	1,658
Total number of baits laid ...	...	47,997
Total number of baits eaten ...	...	10,140

CLOSETS ON THE CONSERVANCY SYSTEM.

During 1924 no earth closets were converted to the water carriage system, and the numbers remaining on the conservancy system at 31st December, 1924, were as follows :—

Earth closets ...	...	4
Privies ...	...	148
Total ...	...	152

1.—INSPECTION OF FACTORIES, WORKSHOPS AND WORKPLACES.

PREMISES.	Number of		
	Inspections.	Written Notices.	Prosecutions.
Factories (including Factory Laundries) ...	857	84	—
Workshops (including Workshop Laundries) ...	1,341	167	—
Workplaces (other than Outworkers' premises included in Part 3 of this Report) ...	376	61	—
Total ...	2,574	312	—

2.—DEFECTS FOUND IN FACTORIES, WORKSHOPS AND WORKPLACES.

PARTICULARS.	Number of Defects	
	Found.	Remedied.
Nuisances under the Public Health Acts :—		
Want of Cleanliness ...	138	133
Want of Ventilation ...	1	3
Overcrowding ...	—	—
Other nuisances ...	159	168
Sanitary accommodation ...	33	14
{ insufficient ...	39	40
{ unsuitable or defective	—	—
{ not separate for sexes	—	—
Breach of special sanitary requirements for bakehouses (Sec. 97 to 100) ...	—	—
Total ...	370	358

3.—HOME WORK.

NATURE OF WORK.	OUTWORKERS' LISTS, SECTION 107.							OUTWORK IN UNWHOLE-SOME PREMISES, SECTION 108.		OUTWORK IN INFECTED PREMISES, SECTIONS 109, 110.		
	Lists received from Employers							Notices served on Occupiers as to keeping of sending lists.	Insta-ces	Notices served.	Instances.	Orders made (S. 110).
	Sending twice in the year.			Sending once in the year.								
	Lists.	Outworkers.		Lists.	Outworkers.							
		Con-tractor.	Work-men.		Con-tractors.	Work-men.						
Wearing Apparel—												
(1) making, etc. ...	54	...	172	3	...	53	30	16	16	...	...
(2) cleaning & washing	...	...	...	...	...	...	...	...	...	...	...

4.—REGISTERED WORKSHOPS.

Workshops on the Register (S. 131) at the end of the Year.								Number.
Bakers ...	...	...	...	...	...	...	...	149
Bootmakers ...	...	...	...	...	...	...	...	190
Dressmakers and Milliners	...	...	...	...	...	...	...	163
Laundries ...	...	...	...	...	...	...	...	36
Tailors ...	...	...	...	...	...	...	...	159
Miscellaneous	...	...	...	...	...	...	...	604
Total number of Workshops on Register								1,301

5.—OTHER MATTERS.

Class	Number
Matters notified to H.M. Inspector of Factories :—	
Failure to affix Abstract of the Factory and Workshop Act (See. 133) ...	...
Action taken in matters referred by H.M. Inspectors as remediable under the Public Health Acts but not under the Factory Act :—	
Notified by H.M. Inspector ...	51
Reports (of action taken) sent to H.M. Inspector ...	47
Other (Notices of Occupation of Workshops received from H.M. Inspector) ...	58
Underground Bakehouses in use at the end of the year ...	1

SHOPS ACTS AND SANITARY INSPECTION OF SHOPS.

Closing Orders in operation	...	...	...	...	15
Observations of shops under Closing Orders	...	...	...	...	4,704
Observations of shops as to weekly half-holiday	...	...	...	...	8,268
Inspections of shops	...	...	...	...	4,927
Infringements of Shops Acts	...	...	...	...	164
Notices requiring sanitary defects to be remedied :—					
Served	...	...	...	...	237
Complied with	...	...	...	...	225

SUMMARY OF LEGAL PROCEEDINGS.

Acts, etc., under which Proceedings were taken	Number	Fined	Cautioned	To pay costs only	Dis-mitted	With-drawn	Amount of Fines and Costs
Shops Acts	164	145	8	7	2	2	£ s. d. 47 17 6
Public Health Act, 1875 (Sec. 96)	2	...	...	...	...	2	...
Merchant Shipping Act ...	11	9	...	...	...	2	49 0 0
Totals	177	154	8	7	2	6	£96 17 6

DISINFECTION.

Houses disinfected	...	...	...	...	...	759
Articles of bedding, clothing, etc., disinfected	...	...	...	...	...	11,896
" " " " destroyed	...	...	...	...	...	77

CLEANSING STATION.

Baths for scabies, pediculosis, etc.	397
--------------------------------------	-----	-----	-----	-----

MORTUARY.

Bodies admitted	...	...	...	...	54
					(41 males and 13 females)
Post-mortem examinations	...	...	...	...	20

APPENDIX I.

VOLUNTARY HOSPITALS COMMITTEE.

OBSERVATIONS ON THE NEED FOR ADDITIONAL HOSPITAL ACCOMMODATION IN CARDIFF.

1. *Accommodation for Infectious Diseases.*—This may be regarded as sufficient for present needs and, so far as concerns the diseases ordinarily treated, for any anticipated requirement. It ought to be remembered that the probable extension on a wide scale within the next decade of the practice of active immunisation is likely to release some of the accommodation formerly retained for diphtheria and scarlet fever. The use of these beds for other notifiable diseases which are at present treated in general hospitals may afford some relief to the general hospitals. Such diseases include poliomyelitis, encephalitis and puerperal fever, all of which are now taken into Cardiff Isolation Hospital. If this policy can be applied to the forms of pneumonia which are notifiable the relief should be very considerable. It should also be noted that there is room at the Isolation Hospital for a material increase of accommodation, amounting to about 50 beds.

2. *Maternity Beds.*—The experience of this Department does not support the view that there is any great need for additional beds for difficult maternity cases in Cardiff. Accommodation is required for women with no proper homes for normal confinement, and the existing hospital for complicated cases urgently requires to be wiped out and replaced by a modern institution. It may be an economy to provide beds for normal cases with unsuitable homes in Cardiff at such a new institution; but I think it is wrong to aim at taking into it normal cases whose homes are some distance from the City when they could be equally well provided for and with greater convenience to themselves in small maternity homes at a variety of centres in the County. A change of attitude on the part of the Treasury would enable local authorities under existing powers to make such provision or help in financing it.

3. *Tuberculosis.*—It is generally supposed that Wales is well provided for in the matter of beds for tuberculosis. The experience of Cardiff is contrary to this. On an average less than 80 beds in Welsh National Memorial Association institutions are occupied by cases of pulmonary and other forms of tuberculosis at any one time, a provision which is grossly inadequate for a population close on 230,000 persons. It has been stated that very little accommodation in general hospitals in Cardiff is held up by cases of this disease. Judging from the information in this Department the aggregate of such bed-days in any year is very considerable, and I think that a strong representation should be made by the Committee that adequate provision for tuberculosis should be made as a way of relieving the voluntary hospitals.

4. *Hospital Beds for Children.*—As information regarding the need for hospital accommodation from sources other than hospital waiting lists is rare, I have thought it worth while to record our experience in relation to the children recommended from the School and Child Welfare Sections of this Department to the hospital throughout a period of twelve months—1st July, 1923, to 30th June, 1924. The figures relate to 50 children (32 of school age and 18 under school age) recommended for in-patient treatment, of whom only 22, or 44 per cent., had been admitted at the date of enquiry. Some had dropped out for various reasons, but 15 were still waiting on for beds. Most of these had been on the books of the hospital for periods varying from six months to a year. Most of those who had been admitted had had to wait for an unreasonable length of time. It should be noted that, as the medical staff know the futility of recommending medical cases, most of the cases above referred to are such as require some sort of operation. Judging from these facts and the knowledge that about 270 children of school age and from Cardiff alone are treated at Cardiff Royal Infirmary in a year, I estimate that for this City at least 60 beds are required for children suffering from acute or severe medical complaints and from defects requiring surgical treatment. Whether some part of this should be in the form of convalescent beds is a matter for further consideration. It should be noted that the Maternity and Child Welfare Act, 1918, enables a local authority to provide or contribute towards the provision of hospital accommodation for children, and the Ministry to give grants for that purpose.

This estimate is over and above the 80 beds recently provided by the Guardians at the City Lodge which will probably be used for the more chronic diseases of infancy and childhood,

the beds being inevitably occupied for a longer period on the average by each child because of the bad home conditions of the families from which the children come.

5. *Accommodation provided by Education Authorities.*—These authorities have power to provide residential open-air schools for debilitated children and for those suffering from chronic non-tuberculous diseases. In Cardiff no such provision has been made and, so far as I am aware, the position in Glamorgan generally is not satisfactory. More extensive use of this power would relieve the voluntary hospitals to some extent.

6. *Orthopaedics.*—Several of the education and health authorities of South Wales are alive to the need for special provision for the treatment and supervision of cripples, and schemes to this end are either already in being or in an advanced state of preparation. Their success primarily depends on hospital facilities which are at present quite inadequate. I think, therefore, that the Committee should seek support for the proposal of the Prince of Wales' Hospital to erect a country branch of at least 100 beds.

7. *General.*—In these hurriedly prepared notes I have purposely confined myself to those aspects of the subject which touch on the work of local authorities. I believe that greater encouragement of these authorities to exercise the powers they already have would result in provision which would relieve the voluntary hospitals of some part at least of the present heavy strain on their accommodation and resources. In Cardiff it should also be remembered that the Guardians have a scheme well advanced for a modern hospital, unconnected with any workhouse, to be erected at Llandough, providing, I believe, about 300 beds. This obviously is a factor affecting the situation, as are also similar developments outside Cardiff Union and the movement toward local provision of hospital accommodation in the mining valleys.

RALPH M. F. PICKEN,

Medical Officer of Health.

CITY HALL,

CARDIFF,

9th October, 1924.

APPENDIX II.

CO-OPERATION BETWEEN PUBLIC HEALTH OFFICERS AND THE GENERAL PRACTITIONERS.*

BY

RALPH M. F. PICKEN, M.B., Ch.B., B.Sc., D.P.H., Medical Officer of Health,
City and Port of Cardiff.

Having been invited to contribute to *THE MEDICAL WORLD* a short article on the above rather controversial topic, I am reminded that, in another connection, I have said that it is possible for parties to spend so much time and energy co-operating that neither of them may have any time left to operate. If co-operation is not free and spontaneous it is unreal. Our object should be to secure this spontaneity.

I believe that the question hardly arose until shortly before the war. There were comparatively few public health officers until the school medical service came into being in 1908, followed by the provision for tuberculosis made by the Insurance Act and the expansion of maternity and child welfare schemes. The primary functions of public health officials were clearly defined and overlapped those of the practitioner to only a slight extent. They dealt with the prevention of infectious diseases and the treatment of such diseases in hospitals; and with environmental conditions generally. Their duties affected very little any interest, real or imaginary, of the general practitioner. Their posts had been called into being with the approval and indeed at the instance of the medical profession, who realised that, as private practitioners, they were not in a position to cope with the environmental and mass problems involved. Medical officers of health, too, appreciated the fact that the success of their work depended very largely on the help they received from practitioners, who obviously were the first to detect the presence of epidemic diseases in most instances, and so the best of feeling existed between the two branches of the profession. Perhaps the first faint breeze of mutual distrust began to blow when the concealment of infectious disease by parents and their failure to seek medical advice, as well as their neglect of reasonable precautions, necessitated the use of lay inspectors to seek out missed cases and put pressure on delinquents. The private practitioner sometimes resented the enquiries made by such officers, especially if they were not made with that tact and discretion which medical etiquette demanded. On the whole, the profession recognised that our endeavours were for the general weal and accepted them, if not with enthusiasm, at least with tolerant contempt.

Things changed, however, when the advice of the medical profession itself that early treatment of minor diseases would prevent more grave sequelæ, was taken up by Royal Commissions and found practical expression in the schemes of Government Departments. The profession recognised that the medical inspection of school children might be a fair field for a whole-time medical officer, but they saw in the relegation to such officers of the treatment of school children, infants, expectant and nursing mothers and special classes of persons such as the tuberculous and those suffering from venereal diseases, an invasion of their own province or that of the consulting specialist. As the administration of these new services fell upon the medical officer of health, whose business it now became to make them as efficient as possible, some of the suspicion engendered by the new policy was transferred to him in person as the executant, and more particularly to the young graduates who determined to enter the public health field through the pathway of the new services.

I do not intend to enter into a discussion of the national policy which brought about this state of affairs. The profession is faced with an accomplished fact. The present type of service cannot be abolished unless the profession have something better to suggest than a return to the conditions of practice prevailing before these services were called into being. I believe that the draft evidence recently circulated by the Council of the British Medical Association for approval or amendment by the medical profession, is an honest and on the whole a successful attempt to formulate such proposals. If some such scheme were to find favour with the profession and the community, the rest of my remarks might well be left unsaid.

* From *The Medical World*, February 20, 1925.

What then is the main hindrance to co-operation as things are at present ? In the first place I do not think that the general practitioner has suffered financially in the least by our activities. The aim of the public health clinics is the detection of the early manifestations of disease and the encouragement of parents to take all necessary steps to prevent the graver results of minor disease, *including consultation of the family doctor*. I am quite certain that the number of children whose parents have consulted their medical adviser has increased and not diminished as the result of our efforts. It is equally certain that most of those who attend our clinics would never have seen any doctor under old conditions until the graver sequelæ had developed which we all equally wish to prevent.

I believe that part of the trouble lies in the conviction on the part of the practitioner that the public health services are creating a group of young and inexperienced specialists without any academic claim to the distinction, without having climbed the customary ladder which the profession by generations of experience has come to recognise as essential to successful specialism. This is to a certain extent true, and no section of the profession is more alive to this danger than the senior members of the service. It is largely for this reason that they, in conjunction with representatives of the general practitioners and consultants, are pressing for a scale of remuneration for prospective public health officers which will justify the demand for such qualifications and experience as their work requires. The practitioner also should not forget that he already recognises the value of a relatively short term of years of concentrated work on one branch of medical science, by calling into consultation young consultants of scarcely longer experience than the services are demanding for their own entrants. The aim of the public health service, in my opinion, should be to place its younger members, so far as any sort of specialism is concerned, in working contact with men of recognised consulting rank, and this object is gradually being achieved in the department for which I am responsible.

Another serious cause of misunderstanding inevitably arises from the introduction of medical contact with families through other channels than the family practitioner. Naturally this is resented by the practitioner, just as he regrets impotently the departure of his patients to another practitioner. As I have already said, if the practitioner does not produce a working alternative to the present system, or accept such an alternative if it is devised for him, he must bear with the present position. The rules of medical etiquette have been evolved to meet this sort of situation and their observance by both parties should remove any cause of friction. I know that the younger and therefore more confident of both the public health officers and practitioners are guilty of gross indiscretions in the references which they make to patients about each others medical opinions. In my own department, and I am sure in every other, any such tendency is actively discouraged, but unfortunately the young practitioner has not always at hand a more experienced and tolerant guide in similar circumstances.

It is useless to talk about co-operation if there is no mutual respect. I am convinced that with closer contact the officer and the practitioner would come to recognise that each is doing his particular job, under difficult conditions, with all the skill and judgment that the average medical man can be expected to have and to apply. When the Medical Boards in connection with Army pensions came into being, and the staff of the department with which I was then connected became members for the purpose of tuberculosis, I was impressed with the improved relations with the general practitioner which resulted from merely working together. I think we each came to recognise that the other knew his job.

If this sort of contact could be extended and the practitioner could have available for his use the facilities, premises, nurses, etc., which the health departments can provide, I do not think we should have to waste words about co-operation. We should have co-ordination which includes co-operation. In the meantime, there appears to be no common meeting-ground except in meetings of various medical societies, both general and local, which, in my experience, only a small group of practitioners find time to attend in each area ; and at various social functions which the young public health officer can rarely afford to patronise. The divergence of interests and methods can only be stopped, in my opinion, by a bold and comprehensive scheme of co-ordination which will bring the two sections into working contact. It is also desirable that any such scheme should make it as easy as possible for men to transfer themselves from the public health service to general practice and *vice versa*, if they find they have chosen the type of work which is not their vocation.

APPENDIX III.

STATISTICAL TABLES OF BIRTHS, DEATHS AND INFECTIOUS DISEASES.

TABLE I.

BIRTHS IN MUNICIPAL WARDS, 1924.

Municipal Wards.	Legitimate.		Illegitimate.		Totals.		Grand Totals
	Males.	Females.	Males.	Females.	Males.	Females.	
Central	177	158	13	10	190	168	358
South	221	161	6	4	227	165	392
Cathays	166	165	3	1	169	166	335
Adamsdown	190	178	7	11	197	189	386
Riverside	167	145	3	7	170	152	322
Canton	211	157	8	8	219	165	384
Grangetown	187	190	8	4	195	194	389
Roath	164	169	5	5	169	174	343
Plasnewydd	167	148	...	...	167	148	315
Splott	248	241	13	5	261	246	507
Penylan	80	77	1	1	81	78	159
Llandaff	210	201	5	4	215	205	420
Gabalfa	252	255	4	2	256	257	513
Transferred to Cardiff—Address unknown	22	27	6	4	28	31	59
Totals	2,462	2,272	82	66	2,544	2,338	4,882

[illegible]

TABLE III.

DEATHS FROM VARIOUS CAUSES UNDER ONE YEAR OF AGE, 1924.

Causes of Death	Under 1 week	1-2 weeks	2-3 weeks	3-4 weeks	Total under 4 weeks	4 weeks- 3 months	3-6 months	6-9 months	9-12 months	Totals
Measles ... ..	...	...	...	...	...	1	...	3	2	6
Whooping Cough ... ..	...	...	...	...	...	4	5	11	3	23
Diphtheria ... ..	...	...	...	...	...	...	...	...	...	...
Influenza ... ..	...	...	...	...	...	1	...	1	1	3
Tuberculosis of Nervous System	...	...	...	...	...	1	2	2	...	5
Tuberculosis of Intestines and Peritoneum ... ..	...	...	...	...	...	...	...	1	...	1
Other Tuberculous Diseases ...	...	...	...	...	...	...	3	1	...	4
Syphilis	1	1	1	...	3	1	3	1	...	8
Meningitis ... ..	...	...	1	...	1	...	...	...	...	1
Convulsions	5	...	1	1	7	4	3	1	1	16
Bronchitis ... ..	...	...	...	1	1	11	7	7	8	34
Pneumonia ... ..	...	...	...	2	2	14	18	11	20	65
Other Respiratory Diseases ...	...	...	...	...	...	...	...	...	1	1
Inflammation of the Stomach ...	...	1	...	...	1	1	...	1	...	3
Diarrhoea and Enteritis ... ..	...	4	...	1	5	17	18	6	2	48
Hernia, Intestinal Obstruction ...	...	...	...	...	...	...	1	1	...	2
Congenital Malformations	7	1	1	1	10	4	1	1	2	18
Congenital Debility & Sclerema ...	9	3	...	1	13	5	6	...	1	25
Icterus	1	1	...	...	2	...	...	...	...	2
Premature Birth	69	7	3	2	81	8	1	1	1	92
Injury at Birth	1	...	...	...	1	...	...	...	...	1
Disease of Umbilicus	1	...	...	...	1	1	...	...	...	2
Atelectasis	5	...	...	...	5	...	...	...	...	5
Suffocation in Bed, and not stated ... ..	...	...	...	...	...	2	...	...	...	2
Other Causes	6	...	...	...	6	2	3	4	...	15
TOTALS	105	18	7	9	139	77	71	53	42	382
Percentage of Total Deaths under 1 year	27.5	4.7	1.8	2.4	36.4	20.1	18.6	13.9	11.0	100

Deaths of:—

Legitimate Infants 350

Illegitimate Infants 32

TABLE IV.

ANALYSIS OF POPULATION, BIRTHS, DEATHS, DEATHS UNDER ONE YEAR, AND DEATHS FROM CERTAIN CAUSES, TOGETHER WITH BIRTH AND DEATH-RATES PER 1,000 THE WHOLE CITY AND IN MUNICIPAL WARDS, 1924.

Localities	Estimated Population	Births				Deaths: All Causes		Deaths under One Year		Deaths from Zymotic Diseases, Tuberculosis, Influenza, and Respiratory Diseases.																			
		Births		Deaths		Deaths		Deaths		Enteric Fever		Measles		Scarlet Fever		Whooping Cough		Diphtheria		Diarrhoea, etc., (under 2 years)		Tuberculosis: Respiratory		Tuberculosis: Other Forms		Influenza		Respiratory Diseases	
		Number	Birth-rate	Number	Death-rate	Number	per 1,000 births	Number	Death-rate	Number	Death-rate	Number	Death-rate	Number	Death-rate	Number	Death-rate	Number	Death-rate	Number	Death-rate	Number	Death-rate	Number	Death-rate	Number	Death-rate	Number	Death-rate
Central	17,153	358	20.9	219	14.7	31	86	...	4	0.23	...	...	5	0.29	...	...	...	...	4	11.2	20	1.46	4	0.29	9	0.58	49	3.38	
Lodging Houses, etc	...	...	...	34	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
South	14,893	392	22.1	230	15.7	50	127	...	3	0.20	...	...	8	0.54	3	0.20	5	12.8	23	1.68	8	0.54	3	0.20	47	3.16	...	...	...
Lodging Houses, etc.	...	...	...	4	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Cathays	20,314	335	16.5	168	8.3	12	36	...	...	...	...	...	2	0.10	1	0.05	...	...	18	0.89	2	0.10	5	0.25	20	0.98	...	...	...
Adamsdown	15,262	386	25.3	260	19.9	50	129	...	6	0.39	...	...	5	0.33	...	...	6	15.5	35	3.21	8	0.59	7	0.65	46	3.08	...	...	...
Lodging Houses, etc.	...	...	...	44	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Riverside	18,951	322	17.0	217	11.4	22	68	...	...	...	...	...	1	0.05	...	...	3	9.3	17	0.90	3	0.16	10	0.53	30	1.58	...	...	...
Canton	18,700	384	20.5	293	10.8	25	65	...	...	...	...	...	2	0.11	...	...	3	7.8	17	0.91	4	0.21	7	0.37	40	2.14	...	...	...
Grange town	15,349	389	25.3	208	13.5	28	72	...	8	0.52	...	...	5	0.32	...	...	3	7.7	24	1.56	2	0.13	8	0.52	45	2.93	...	...	...
Roath	17,347	343	19.8	198	11.4	26	76	...	4	0.23	2	0.11	...	...	2	0.11	4	11.7	15	0.86	3	0.17	6	0.35	33	1.90	...	...	...
Plasnewydd	17,293	315	18.2	190	11.0	23	73	...	3	0.17	...	...	4	0.23	...	...	5	15.9	23	1.33	3	0.17	8	0.46	29	1.68	...	...	...
Sploott	19,559	507	25.9	247	12.6	34	67	...	3	0.15	...	...	2	0.10	1	0.05	8	15.8	22	1.12	2	0.10	11	0.56	54	2.76	...	...	...
Pennylan	14,331	159	11.1	126	8.8	7	44	...	...	...	...	...	1	0.07	1	0.07	1	6.3	15	1.05	6	0.42	11	0.70	19	1.33	...	...	...
Llandaff	15,737	420	26.7	155	9.8	30	71	...	...	...	...	...	...	...	1	0.06	2	4.7	18	1.14	1	0.06	2	0.13	30	1.91	...	...	...
Gabalfa	15,511	513	33.1	180	11.6	41	80	...	4	0.26	...	...	9	0.58	1	0.06	8	15.6	14	0.90	7	0.45	2	0.13	34	2.19	...	...	...
Institutions, etc.	6,000	59	...	57	...	3	...	...	...	...	...	...	...	...	...	...	1	...	7	...	1	...	3	...	15	...	...	...	...
Cardiff	226,400	4,882	21.6	2,740	12.1	382	78	...	35	0.15	2	0.01	44	0.19	10	0.04	53	10.8	289	1.28	56	0.25	96	0.42	501	2.21	...	...	...

TABLE V.
CASES OF ACUTE INFECTIOUS DISEASES NOTIFIED BY AGE AND SEX, 1924.

Disease	Under 1 year		1-2 years		2-3 years		3-4 years		4-5 years		5-10 years		10-15 years		15-20 years		20-25 years		25-35 years		35-45 years		45-55 years		65 years and over		All Ages			
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.		
Smallpox	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Scarlet Fever	2	...	2	5	4	8	9	10	12	28	47	12	23	4	4	2	4	2	5	1	...	...	1	...	...	...	76	114	190
Diphtheria	3	2	8	5	17	8	9	1	12	11	33	21	14	13	5	7	4	12	3	9	1	4	...	2	...	...	109	95	204
Enteric Fever	...	...	...	...	...	...	...	1	...	...	...	2	1	...	2	2	...	...	2	...	...	1	1	...	...	...	6	6	12
Pneumonia	8	9	13	16	5	5	4	6	4	3	12	8	5	3	12	7	13	4	26	12	26	7	45	17	14	10	187	107	294	
Puerperal Fever	...	...	...	...	...	...	...	...	...	...	...	...	...	...	2	...	6	...	12	...	...	4	...	...	...	...	...	24	24
Cerebro-spinal Fever	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Acute Poliomyelitis	1	2	3	4	3	1	...	1	...	1	4	1	1	2	1	...	2	4	6	10
Encephalitis Lethargica	1	1	2	1	2	4	1	5
Dysentery	57	39	96
Ophthalmia Neonatorum	57	39
Erysipelas	2	...	1	1	...	1	...	...	...	...	1	1	1	2	1	2	...	2	6	2	9	8	18	9	8	3	47	31	78
Malaria	5	...	5	...	4	14	14
Chickenpox*	23	15	19	24	22	26	30	21	82	67	179	200	18	29	6	2	5	3	4	2	...	1	388	390	778	778

* Statutory notification of chickenpox ceased on 20th July.

TABLE VI.

NOTIFIED CASES OF ACUTE INFECTIOUS DISEASES IN MUNICIPAL WARDS AND CASES REMOVED TO HOSPITAL, 1924.

Municipal Wards	Smallpox	Scarlet Fever	Diphtheria	Enteric Fever	Pneumonia	Puerperal Fever	Cerebro-Spinal Fever	Acute Polyomyelitis	Encephalitis Lethargica	Dysentery	Ophthalmia Neonatorum	Erysipelas	Malaria	Chicken-pox*
Central	23	11	1	19	2	...	1	...	...	6	4	...	106
South	6	19	...	23	1	...	1	...	...	3	6	6	53
Cathays	16	8	...	27	3	...	3	...	...	3	12	...	44
Adamsdown	10	10	1	15	1	...	1	1	...	15	6	1	115
Riverside	8	12	1	19	1	...	2	2	...	5	7	...	38
Canton	8	15	1	27	1	...	1	...	...	6	1	...	60
Grangetown	7	13	2	4	...	...	2	1	1	4	5	...	50
Roath	19	18	4	33	1	...	2	1	1	5	1	...	79
Plasnewydd	11	18	2	39	2	...	2	...	...	8	3	...	54
Splott	27	22	...	19	2	...	3	3	...	17	5	1	44
Penylan	16	6	...	12	...	...	1	...	...	3	2	...	24
Llandaff	11	12	...	17	...	...	1	1	...	4	3	...	48
Gabalfa	27	35	...	16	...	...	1	...	...	8	2	...	62
Institutions	1	5	...	24	10	...	1	1	3	9	21	6	1
Totals	190	204	12	294	24	...	22	10	5	96	78	14	778
Cases removed to Hospital	150	167	7	1	...	...	3	3	1	...	...	...	5

* Statutory notification of chickenpox ceased on 20th July.

APPENDIX IV

CARDIFF ISOLATION HOSPITAL.

ADMISSIONS AND DISCHARGES DURING 1924 (INCLUDING PORT CASES).

	0—5 years	5—15 years	15—25 years	25—45 years	45—65 years	Totals
Remaining in Hospital 29th December, 1923 :—						
Scarlet Fever	9	13	...	...	...	22
Diphtheria	7	12	2	2	...	23
Enteric Fever ... ..	...	...	...	...	...	...
Smallpox ... ..	...	...	...	...	...	...
Other Diseases ... ..	...	...	1	1	...	2
Totals	16	25	3	3	...	47
Admitted during the year 1924 :—						
Scarlet Fever	47	86	11	8	...	152
Diphtheria	65	69	25	14	1	174
Enteric Fever ... ..	...	1	3	2	1	7
Smallpox ... ..	...	...	1	...	...	1
Other Diseases	7	12	8	7	2	36
Totals	119	168	48	31	4	370
Totals under Treatment in 1924	135	193	51	34	4	417
Discharged during the year 1924 :—						
(a) Recovered—						
Scarlet Fever	49	87	11	7	...	154
Diphtheria	61	69	23	12	1	166
Enteric Fever ... ..	...	1	3	2	1	7
Smallpox ... ..	...	...	1	...	...	1
Other Diseases	2	7	9	7	...	25
Totals	112	164	47	28	2	353
(b) Died—						
Scarlet Fever	1	...	...	...	...	1
Diphtheria	6	2	...	1	...	9
Enteric Fever ... ..	...	...	...	...	...	...
Smallpox ... ..	...	...	...	...	...	...
Other Diseases	2	1	...	...	...	3
Totals	9	3	...	1	...	13
Remaining in Hospital 3rd January, 1925 :—						
Scarlet Fever	6	12	...	1	...	19
Diphtheria	5	10	4	3	...	22
Enteric Fever ... ..	...	...	...	...	...	...
Smallpox ... ..	...	...	...	...	...	...
Other Diseases	3	4	...	1	2	10
Totals	14	26	4	5	2	51

Mortality per cent. of cases under treatment :—

Scarlet Fever	0.6	Enteric Fever	0.0
Diphtheria	4.6	Other Diseases	7.7

APPENDIX V.

METEOROLOGICAL OBSERVATIONS TAKEN AT PENYLAN, CARDIFF,
DURING 1924.TABLE I.
BAROMETRIC PRESSURE AND RELATIVE HUMIDITY.

1924.	Attached Thermometer (Mean)	Mean Barometric Pressure*		Hygrometer*.		
		Uncorrected	Reduced to Mean Sea Level and Temp. 32° F.	Dry Bulb (Mean)	Wet Bulb (Mean)	Mean Relative Humidity.
	°F.	Inches	Inches	°F.	°F.	%
January	44	29.726	29.942	41.2	40.0	90
February	42	29.850	30.073	37.8	35.7	83
March	43	29.536	29.755	39.0	36.8	81
April	48	29.664	29.867	45.6	42.8	79
May	54	29.692	29.876	51.8	49.3	83
June	59	29.854	30.190	58.9	53.3	68
July	61	29.745	29.908	58.5	55.6	83
August	60	29.715	29.881	57.0	54.5	85
September	59	29.668	29.835	55.4	53.3	86
October	54	29.715	30.038	50.4	48.9	89
November	48	29.847	30.052	44.7	43.1	88
December	47	29.724	30.031	45.0	43.8	83
Means	52	29.730	29.954	48.8	46.4	83

* From observations at 9 a.m. and 9 p.m.

TABLE II.
TEMPERATURE.

1924.	Absolute Maximum	Absolute Minimum	Mean of Maximum	Mean of Minimum	Mean Temperature	Difference from Average (35 years)
	°F.	°F.	°F.	°F.	°F.	°F.
January	55	22	46.3	37.4	41.8	+ 2.0
February	51	24	44.5	34.4	39.5	— .8
March	59	25	48.8	33.5	41.2	— 1.1
April	71	32	53.1	38.9	46.0	— .3
May	71	38	59.6	46.8	53.2	+ .4
June	70	41	63.1	50.8	56.9	— .3
July	82	44	66.2	55.3	60.7	— .0
August	71	46	61.2	54.0	57.6	— 2.6
September	68	41	61.5	51.1	56.3	.0
October	68	36	54.1	46.4	50.2	— .1
November	58	23	49.8	40.9	45.3	+ 1.2
December	56	34	50.0	41.1	45.5	+ 4.5
	Highest 82	Lowest 22	Mean 54.8	Mean 44.2	Mean 49.5	+ .2

TABLE III.

TERRESTRIAL RADIATION, UNDERGROUND TEMPERATURE, SOLAR RADIATION AND
SUNSHINE.

1924.	Temperatures.				Bright Sunshine.	
	Grass Minimum (Mean)	Underground (Mean)		Solar Maximum (Mean)	Total Duration	Difference from Average (16 years)
		1ft.	4ft.			
		°F.	°F.	°F.		
January	34.8	41.0	43.7	68	52.0	— .4
February	28.4	38.4	43.2	78	76.8	+ 1.5
March	30.5	39.4	41.7	97	169.8	+ 60.6
April	33.9	45.3	43.3	105	174.3	— 1.4
May	43.7	54.0	49.6	118	170.8	— 48.2
June	48.4	59.6	54.5	118	160.4	— 57.8
July	49.1	61.1	57.2	123	214.3	+ 4.0
August	49.0	59.6	58.0	Solar Maximum Thermometer out of order.	164.1	— 23.5
September	48.2	57.6	57.3		119.6	— 27.6
October	43.4	52.4	54.4		79.3	— 27.8
November	37.4	46.6	50.8		64.8	— 1.4
December	38.0	45.2	48.0		46.0	— 4.3
	Mean 40.4	Mean 50.0	Mean 50.1	97*	1,492.2†	— 126.3

* Average 6 months—January/June. †=34% of possible duration and a daily average of 4.1 hours.

TABLE IV.

RAINFALL.

1924.	Total Fall.	Difference from Average (35 years)	Greatest Fall in 24 hrs.*		Number of Rain-days (0.01 inches or more).
			Amount	Day	
	Inches	Inches	Inches		
January	5.44	+ 1.76	.70	18th	19
February ... ..	.61	— 2.45	.22	9th	7
March	2.03	— 1.23	.99	22nd	9
April	3.31	+ .64	1.00	13th	13
May	5.11	+ 2.67	.93	23rd	23
June	2.39	— .30	.55	11th	16
July	6.23	+ 3.50	1.32	20th	17
August	6.09	+ 1.95	1.14	21st	21
September	6.84	+ 3.93	1.31	7th	21
October	6.24	+ 1.46	1.12	29th	19
November	3.74	+ .36	1.13	1st	13
December	7.18	+ 2.49	1.18	26th	19
	55.21	+ 14.78	Greatest for Year:— 1.32 in. on 20th July.		197

Measured at 9 a.m. each day for the preceding 24 hours. * 24 hours ended 9 a.m. next day.

APPENDIX VI.

CITY OF CARDIFF.

WELFARE OF THE BLIND.

REGISTRATION AS AT 31st MARCH, 1925.

TABLE I.

Age Period—Years.				Males.		Females.		Totals.
0—5	...	...	...	1	...	—	...	1
5—16	...	...	...	19	...	7	..	26
16—21	...	...	...	6	...	11	...	17
21—30	..	...	..	23	...	16	...	39
30—40	...	...	..	30	...	25	..	55
40—50	..	...	...	26	...	9	...	35
50—60	..	...	...	20	...	23	...	43
60—70	...	...	...	34	...	39	...	73
70—	...	...	...	31	...	30	...	61
Totals				190	...	160	...	350

TABLE II.

AGES AT WHICH BLINDNESS OCCURRED.

Age Period—Years.				Males.		Females.		Totals.
0—1	...	...	...	49	...	27	...	76
1—5	...	...	...	13	...	15	...	28
5—10	...	...	...	10	...	7	...	17
10—20	...	...	...	14	...	15	...	29
20—30	...	...	...	16	...	13	...	29
30—40	...	...	...	12	...	12	...	24
40—50	...	...	...	18	...	13	...	31
50—60	...	...	...	25	...	19	...	44
60—70	...	...	...	22	...	20	...	42
70—	...	..	..	11	...	11	...	22
Unknown	...	...	...	0	...	8	...	8
Totals				190	...	160	...	350

TABLE III.

(a) EMPLOYMENT—Age Period 16 and upwards.

				Males.		Females.		Totals.
Employed	...	...	...	81	...	39	..	120
Trained but employed	..	..	..	3	..	4	..	7
Under training	..	...	...	3	...	2	...	5
No training but trainable	...	...	...	1	...	3	...	4
Unemployable	...	...	...	82	...	105	...	187
Totals				170	...	153	...	323

(b) OCCUPATIONS OF EMPLOYED.

Agents, Collectors, etc. ...	...	...	...	...	8
Basket and Cane Workers ...	...	...	...	...	46
Boot Repairers ...	...	...	...	...	1
Clerks, Typists ..	...	...	...	...	1
Dealers (Tea Agents, Shop-keepers, etc.) ...	...	...	...	...	1
Domestic Servants ..	...	...	...	...	1
Hawkers ...	...	...	...	...	3
Home Teachers ...	...	...	...	...	2
Knitters ...	...	...	...	...	7
Labourers ...	...	...	...	...	3
Masseur or Masseuse ...	...	...	...	...	1
Mat Makers ...	...	...	...	...	16
Musicians and Music Teachers ...	...	...	...	...	1
News Vendors ...	...	...	...	...	3
School Masters ...	...	...	...	...	1
Straw and String Bag Makers ...	...	...	...	...	2
Tuners ...	...	...	...	...	7
Ships Fender Makers ...	...	...	...	...	12
Miscellaneous ...	...	...	...	...	4
Total ...					120

TABLE IV.

PHYSICALLY AND MENTALLY DEFECTIVE.

			Males.		Females.		Totals.
(a) Mentally Defective*	...	...	45	...	29	...	74
(b) Physically Defective	...	...	5	...	24	...	29
(c) Deaf	...	...	6	...	17	...	23
Combinations of (a), (b) and (c) ..			1	...	5	...	6
Totals ...			57	...	75	...	132

TABLE V.

SCHOOL AGE PERIOD (5-16) ACCORDING TO MENTAL OR
PHYSICAL DEFECTS.

				Males.		Females.		Totals.
At School :—								
Normal ...	...	...	...	20	...	4	...	24
Not at School :—								
Normal ...	...	...	...	0	...	1	...	1
Mentally Defective	...	...	...	1	...	0	...	1
Totals ...				21	...	5	...	26

* Including persons suffering from epilepsy, fits and serious nervous disability.

APPENDIX VII.

MENTAL DEFICIENCY ACT, 1913.

REPORT OF THE MEDICAL OFFICER OF HEALTH FOR THE YEAR ENDED
31ST DECEMBER, 1924.

The usual statistical tables presenting in detail the work of the Department in connection with mentally defective persons during the year 1924 are submitted herewith.

STATISTICAL TABLES.

TABLE I.

Cases under observation at home during the year 1924.

(a) Cases under observation at home at 1st January, 1924	...	124
(b) Cases coming under observation at home during the year	...	68
(c) Total number dealt with	...	192
(d) Cases ceasing to be under observation	...	43
(e) Cases remaining under observation at home at 31st December,		
1924	...	149

TABLE II.

Cases ceasing to be under observation—See Table I. (d).

(a) Sent to Institutions by Local Authority	...	18
(b) Placed under Guardianship by Local Authority	...	1
(c) Removed to Mental Hospital	...	1
(d) Placed in Institutions by parents	...	2
(e) Left the district	...	5
(f) Transferred to Local Education Authority	...	3
(g) Deceased	...	7
(h) Removed to Poor Law Institutions	...	2
(i) Not mentally defective	...	4
Total	...	43

TABLE III.

Mental Defectives under observation at home at 31st December, 1924—See Table I. (e).

	31st December, 1924.			1st January, 1924.
	Males.	Females.	Totals.	Totals.
Idiots	6	13	19	15
Imbeciles	28	23	51	17
Feeble-minded	27	26	53	43
Moral Imbeciles	...	...	...	1
Unclassified or not examined	9	17	26	48
Totals	70	79	149	124

TABLE IV.

Examinations during the year.

New cases examined—See Table I. (b)	...	...	...	68
Cases examined but previously under observation—Included in Table I (a)	...	...	...	27
Total	...	...	...	95

TABLE V.

Cases re-examined during the year.

	1924.	1923.
Idiots	8	10
Imbeciles	51	20
Feeble-minded	44	24
Moral Imbeciles	0	4
Not Mentally Defective or not Classified	7	1
Totals	110	59

TABLE VI.

Cases that failed to attend for examination or re-examination.

	1924.	1923.
Number	18	22

TABLE VII.

Visits paid by the Visiting Officer.

	1924.	1923
Number	653	552

TABLE VIII.

Ages and grading of new cases examined during the year—See Table IV.

Ages— Years.	GRADING.								Total
	Idiots		Imbeciles		Feeble-minded		Not Mentally Defective		
	Male	Female	Male	Female	Male	Female	Male	Female	
3	...	2	..	...	...	...	...	..	2
4	...	1	...	...	...	...	1	..	2
5	..	1	1	1	...	...	1	...	4
6	...	2	3	...	...	...	...	...	5
7	1	3	1	...	...	...	5
8	1	1	1	...	...	...	...	...	3
9	2	1	...	...	...	...	3
10	4	5	...	...	...	...	9
11	...	1	7	...	...	...	...	...	8
12	4	3	...	..	...	...	7
13	3	1	...	...	..	1	5
14	1	1	...	...	...	...	2
15	3	...	...	..	1	4
16	4	...	...	4
17	1	...	1	1	2	2	1	...	8
18	1	1	...	2
19	1	...	...	1
20	1	...	...	1
21	2	...	...	2
22	1	...	1	4	...	...	6
23	1	...	...	...	...	1	...	...	2
25	1	...	...	...	...	1
28	1	...	1	...	...	...	2
30	1	...	...	...	1
32	1	1	...	..	2
37	1	1
39	2	...	...	2
49	1	1
Totals	3	8	30	20	7	19	4	4	95

TABLE IX.

Number of mental defectives in Institutions chargeable against the Mental Deficiency Committee.

1.	Remaining in Institutions at 1st January, 1924	...	...	61
2.	Admitted during 1924...	...	...	18
3.	Placed under Guardianship	...	...	1
				— 80
4.	(a) Died in Institutions	...	...	2
	b) Transferred to State Institutions	...	...	2
	(c) Transferred to Mental Hospital	...	...	1
				— 5
5.	Remaining in Institutions at 31st December, 1924	...		75*
				—

* Five permissive and 70 obligatory.

TABLE X.

Number of mental defectives removed to Institutions and number placed under Guardianship during the year at the instance of the Local Authority—See Table II. (a) and (b).

				1924.	1923.
Obligatory Cases	{	Idiots ...	...	3*	2
		Imbeciles ...	...	10	2
		Feeble-minded ...	...	4	6
		Total ...	...	17	10
Permissive Cases	{	Idiots ...	...	0	1
		Imbeciles ...	...	2	0
		Feeble-minded ...	...	0	0
		Grand Total ...	...	19	11

TABLE XI.

Summary of Defectives placed and remaining in Institutions and under Guardianship by the Local Authority at 31st December, 1924—See Table IX (5)

Name of Institution.	Idiots	Imbeciles	Feeble-minded	Moral Imbeciles	Totals	
					1924.	1923.
Stoke Park Colony, Bristol ...	...	8	3	...	11	9
Metropolitan Asylums Board ...	5	5	...	...	10	8
Prudhoe Hall Colony, Northumberland ...	...	...	4	...	4	4
Brentry Institution, nr. Bristol ...	...	2	...	...	2	2
House of Help, Bath ...	...	...	1	...	1	1
St. Joseph's Home, Suffolk ...	...	...	1	...	1	1
St. Francis' Home, Buntingford ...	...	...	3	...	3	3
Pield Heath House, Middlesex ...	...	1	...	...	2	2
Ely Institution, Cardiff ...	2	5	18	1	26	23
Drymma Hall, Neath ...	...	...	1	...	1	1
Calderstones Institution, Lanes. ...	3	...	3	...	6	6
Seafeld House, Seaforth, Lanes. ...	...	1	...	...	1	1
Royal Earlswood Institution... ..	...	2	...	...	2	...
Monkton Hall, Jarrow ...	...	...	1	...	1	...
Ruthin Poor Law Institution ...	...	1	...	2	3	...
Brighton Guardianship Society ...	1	...	...	...	1	...
Totals ...	11	25	35	4	75†	61

* Including one case placed under Guardianship.

† Five permissive and 70 obligatory.

RALPH M. F. PICKEN,

Medical Officer of Health.

CITY HALL, CARDIFF,

24th March, 1925.